



Lindale Rural Water Supply Corporation

**Monthly Bank Draft Authorization**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Customer Account #:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Alternate Phone:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Bank:** \_\_\_\_\_

**Bank Routing #:** \_\_\_\_\_

**Bank Account #:** \_\_\_\_\_

I Authorize Lindale Rural Water Supply Corp. to draft my bank account on the 13<sup>th</sup> of every month for my water bill.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Lindale Rural Water-903-882-3335 / Fax #-903-882-6822