

## DIRECT PAY CHECK AUTHORIZATION TO THE CITY OF COVINGTON, GEORGIA

ACCOUNT NAME:
ACCOUNT NUMBER:
(Please list all account numbers)
NAME OF BANK:
ADDRESS/ CITY/ STATE/ ZIP:
ROUTING NUMBER: ACCOUNT NUMBER:
CHECKING, OR SAVINGS   PAPERLESS   EMAIL:
APPLICATION TO CITY OF COVINGTON FOR PAYMENT OF UTILITY BILLING ACCOUNTS VIA PRE-AUTHORIZED CHECKS As a convenience to the undersigned customer, I hereby request and authorize the City of Covington, Georgia (City) to draw checks on my bank account identified above for the payment of utility fees provided by the City described above, whether or not I am personally responsible for the payment of the account identified. I understand the City will present to the bank designated on the <u>due date of the utility bill</u> for the identified account(s), a draft or pre-approved check form as may be required by my bank for charge to my account as hereinafter identified. I understand and agree that in the event any such check or draft presented by the City to my account and bank as herein identified is not paid upon presentment, regardless of reason therefore, same shall constitute non-payment of the within identified accounts on their due date, resulting in the applicable penalty without further notice from the City by the final due date, the service that any check or draft drawn by the City on my herein identified account shall not constitute payment of the account until the check or draft has been paid and the City has no further liability thereon to the drawee bank.
The undersigned acknowledges that he or she has simultaneously herewith executed an authorization to the within identified bank authorizing same to honor checks drawn by and payable to the City of Covington, Georgia.
CUSTOMER PRINT NAME:
CUSTOMER SIGNATURE:
DATE: