

Regional Utilities

operated by



Florida Community Services Walton County

corp

4432 US Highway 98 East • Santa Rosa Beach, FL 32459
www.regionalutilities.net • 850-231-5114 • fax 850-231-4924

AUTHORIZATION FOR ELECTRONIC TRANSFER OF FUNDS

Name: _____ Phone #: _____

Mailing Address: _____

Regional Utilities
Account Number

Service Address

Authorization form required for each utility account

Please check one: Checking () Savings ()

I authorize Regional Utilities to debit my bank account for the total due on my utility account at the time of the scheduled monthly draft. I understand this will be the 15th of each month or the following business day should the 15th fall on a weekend or holiday. I accept responsibility to contact Regional Utilities should I choose to cancel the withdrawal. The cancellation request must be requested prior to the draft date. Under penalty of perjury, I attest that I am an authorized signer on this account or otherwise have authority to act on this account. A voided check is required.

Customer Signature: _____ Date: _____

OFFICE USE ONLY

Bank ABA Routing # _____

Bank Account # _____

Bank Name & Mailing Address: _____

Draft Information # _____