



City of Lake Ozark

At Bagnell Dam — Lake of the Ozarks

AUTOMATIC WITHDRAWAL AGREEMENT FORM

Authorization Agreement

I hereby authorize the **City of Lake Ozark** to initiate automatic withdrawals from my account at the financial institution named below.

Further, I agree not to hold the **City of Lake Ozark** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me.

This agreement will remain in effect until the **City of Lake Ozark** receives a written notice of cancellation from me or my financial institution, or until I submit a new withdrawal agreement form to the Utility Department.

Account Information

| | | |
|--------------------------------|--|--|
| Name of Financial Institution: | | |
| Financial Institution Address: | | Financial Phone #: |
| Name on Checking Account: | | |
| Routing Number: | | |
| Account Number: | | <input type="checkbox"/> Checking <input type="checkbox"/> Savings |
| Utility Account Number: | | |
| Primary Personal Email: | | |

Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Please attach a voided check and return this form to the Utility Department.