



City of Liberty Hill

UTILITY BILLING

City of Liberty Hill
926 Loop 332 --- P.O. Box 1920
Liberty Hill, Texas 78642

Phone: 512-778-5449
Fax: 512-778-5418
Email: CYorek@LibertyHillTx.gov

BANK / CREDIT CARD DRAFT AUTHORIZATION FORM

Applicant Name:	Co-Applicant Name:
Phone No.:	Phone No.:
Street Address for Service:	Account No.:

Complete the following for Monthly Bank Draft:

Draft from: Checking (**Attach voided check**) Savings (**Attach withdrawal slip**)

I authorize The City of Liberty Hill Utilities to deduct my bill payments from my bank account on my due date. I understand that if at any time I decide to discontinue the payment service, I will notify The City of Liberty Hill Utilities.

I understand that if funds are insufficient to cover the draft amount, a charge will be applied upon payment.

I acknowledge that the Bank Draft Program is a free service provided by The City of Liberty Hill.

Signature: _____

Date: _____

Complete the following for Monthly Credit Card Draft: (Please attach a copy credit card, front and back.)

Type: VISA MasterCard Discover

Name on Card:	Card No.:
Expiration Date:	Security Code:

I authorize The City of Liberty Hill Utilities to deduct my bill payments to my credit card on my due date. I understand that if at any time I decide to discontinue this payment service, I will notify the City of Liberty Hill Utilities.

I understand that if funds are insufficient to cover the draft amount, a charge will be applied upon payment.

I acknowledge that the Bank Draft Program is a free service provided by The City of Liberty Hill.

Signature: _____

Date: _____

For Office Use Only:

Completed by: _____	Date: _____
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