



Finance Department Tax ID 86-6000235
118 Arizona St • Bisbee, Arizona 85603
Phone (520) 432-6000 • FAX (520) 432-4025 • TDD (520) 432-7681

Authorization Agreement For Direct Debits

I hereby authorize the CITY OF BISBEE to initiate DEBIT entries and/or corrections to my (our) _____ Checking _____ Savings account (select one) indicated below, at the bank named below. The amount due to the City of Bisbee will be drawn on approximately the 23rd day of each month. I (We) understand that if this account does not have sufficient funds to pay the normal amount due, normal NSF fees will be charged.

_____	_____
Bank Name	Branch Name
_____	_____
City	State
_____	_____
Bank Transit / ABA Number	Bank Account Number

This authorization is to remain in full force until the City of Bisbee has received written notification from me of its termination, in such manner as to afford the City of Bisbee and the bank reasonable timeframe in which to take action.

_____	_____
Signature	Date
_____	_____
Printed name	City Account Number

Daytime phone number	

****PLEASE ATTACH A VOIDED CHECK FOR THIS ACCOUNT****