



City of Bloomfield  
915 N First Street  
Bloomfield, NM 87413  
(505) 632-6305  
Monday through Thursday  
7:00 am – 5:30 pm

## PREAUTHORIZED PAYMENT (ACH DEBIT) AUTHORIZATION FORM

DATE: \_\_\_\_\_

I hereby authorize the City of Bloomfield to initiate debit entries to the checking or savings account indicated below, and the depository named below, to debit the same to such account.

**PLEASE BE INFORMED THAT THE BANK WILL RUN THROUGH ONE TEST CYCLE BEFORE ACTUALLY DRAFTING THE ACCOUNT. YOU MAY NEED TO PAY ONE MORE BILL VIA CHECK/CASH/ MONEY ORDER.**

I AM A SIGNOR ON THE ACCOUNT INDICATED BELOW.

BEGIN DATE:		END DATE: - or - INDEFINITE	
ACCOUNT TYPE:			
CHECKING ACCOUNT NO.:		SAVINGS ACCOUNT NO.:	
TRANSIT / ABA NO. ROUTING NO. (Found at the bottom left of your check or savings deposit slip.)		ROUTING NO.	
FINANCIAL INSTITUTION NAME:			
FINANCIAL INSTITUTION ADDRESS:			
CITY:		STATE:	ZIP:
This authority will remain in effect until the City of Bloomfield has received written notification from me, the depositor, of its termination in such time and in such a manner as to afford the City of Bloomfield a reasonable opportunity to act on it.			
NAME ON ACCOUNT:			
SERVICE ADDRESS:			
SIGNATURE:			
DATE:		UTILITY ACCOUNT NO.	
<b>ATTACH VOIDED CHECK</b>			