



Town of Mt. Airy  
P.O. Box 257  
1231 Dicks Hill Parkway  
Mt. Airy, GA 30563  
Phone: (706)778-6990  
Fax: (706)776-3976

**Bank Draft  
Authorization**

I, \_\_\_\_\_, authorize the Town of Mount Airy to deduct my monthly water/garbage/fire protection charges from my bank account by bank draft payment each month and my account # \_\_\_\_\_ will be credited the amount deducted.

Bank Name \_\_\_\_\_

Account Number \_\_\_\_\_

Routing Number \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

ATTACH VOIDED CHECK

Office Use:
Authorized Signature:
Date Received: