



City of Gainesville Automatic Bank Draft Authorization Agreement

I authorize the City of Gainesville to initiate debit entries to my account listed below.

This authority is to remain in effect until the City of Gainesville has received thirty (30) days written notice from me to cancel authorization.

I further understand that it is my responsibility to notify the City of Gainesville of any change in bank name, account number, and/or routing number.

Please note that we require a pre-note or test transaction to make sure the provided account information is valid before drafting your checking account. This means that your next bill will NOT automatically draft from your checking account and you are responsible for paying it in person.

Date: _____

Name (printed): _____

Signature: _____

Address: _____

Account Number: _____

Bank Name & Address: _____

Bank Account Number: _____

Bank Routing Number: _____

Conveniently drop off authorization form and a voided check at our drop-box, drive-thru or mail to:

City of Gainesville
200 S Rusk St.
Gainesville, TX 76240

