



**CITY OF ORONOCO**  
**Automatic Draft – Authorization Form**

**1. Complete and Sign form**

Full Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Utility Account number: \_\_\_\_\_

- I understand that my account will be drafted on the 21<sup>st</sup> of each month (or closest date due to a holiday or weekend). I have the right to stop automatic payment of my bill upon timely written notice to the City of Oronoco. I am responsible for keeping the City informed with current account information.

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

Bank City and State: \_\_\_\_\_

Bank routing number: \_\_\_\_\_

Bank account number: \_\_\_\_\_

\_\_\_\_\_ Checking                      \_\_\_\_\_ Savings

- I hereby acknowledge that I am the account holder and I authorize the City of Oronoco to draft the amount of my monthly utility bill from the financial institution listed above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**2. Send completed form to:**

Mail: 115 2<sup>nd</sup> St NW, Box 195, Oronoco, MN 55960

Email: [rwhile@oronoco.com](mailto:rwhile@oronoco.com)

Fax: 507-367-4982

- For any questions on your account or the form, please contact City Hall at 507-367-4405 or [rwhile@oronoco.com](mailto:rwhile@oronoco.com)