



The following form must be completed and returned to MEWS with a voided check in order for us to pay your monthly bill from your office.

Mayfield Electric & Water Systems Account Information (Please Print):

Name: _____

Account Number: _____

Address: _____

Phone Number: _____

Email Address: _____

Bank Information (Please Print):

Depositor's Name as shown on Bank Records: _____

Name of Bank & Branch: _____

Bank Street Address, City & State: _____

Bank Routing Number: _____

Bank Account Number: _____

I hereby authorize my electric, water, wastewater, or internet bills to be paid by my bank via draft from Mayfield Electric & Water Systems.

It will not be necessary for Mayfield Electric & Water Systems, or anyone employed by MEWS to sign such drafts or checks, and I agree that MEWS' rights in respect to each such draft shall be the same as if issued and signed by me personally, I further agree that MEWS shall be under no obligation to furnish me with any special advice or notice in writing or otherwise of the presentment or payment of any such draft or check or charging of the same to my account. This authorization is to remain in effect until revoked by me in writing and until MEWS receives such notice, I agree that MEWS shall be fully protected in honoring any such draft.

Signature of Depositor: _____

Date: _____

MEWS Employee: _____

Date: _____

