

**BANK DRAFT ENROLLMENT FORM**

Current bill must be paid. Both forms must be signed. Funds will be drawn from account between the 12<sup>th</sup> – 15<sup>th</sup> of the month, so payment will be posted by the 15<sup>th</sup>.

\_\_\_\_\_  
Name as listed on bill

\_\_\_\_\_  
Bill Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Home Telephone Number Work Number

\_\_\_\_\_  
List all accounts you wish to have drafted

\_\_\_\_\_  
Member Account Numbers

\_\_\_\_\_  
Signature Social Security Number

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS**

**PAYMENTS (ACH DEBITS)**

**AUTHORIZATION TO HONOR CHECK DRAWN BY:**

**BIG SANDY RURAL ELECTRIC COOPERATIVE, CORP.**

**504 11<sup>TH</sup> Street, Paintsville, KY 41240**

**TO:** \_\_\_\_\_

**BANK ADDRESS:** \_\_\_\_\_

As a convenience to me, I hereby request and authorize you to pay and charge to my account checks drawn on my account by and payable to the order of Big Sandy RECC, Paintsville, KY, provided there are sufficient collected funds in said account to pay the same upon presentation. I agree that your rights in respect to each check shall be the same as if it were a check drawn on you signed personally by me. The authority is to remain in effect until revoked by me in writing and until you actually receive such notice, I agree that you shall be fully protected in honoring any such check.

I hereby agree that if any such check be dishonored, whether with or without cause and whether intentionally or inadvertently, you shall be under no liability whatsoever even though such dishonor results in the discontinuance of electric service.

\_\_\_\_\_  
Bank Routing Number Bank Account Number

\_\_\_\_\_  
Signature of Electric Bill Payer Date

**NOTE: DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.**