



Authorization for Automatic Bill Payments

Name as shown on bill _____

Service Address: _____

BLP Account number _____

Bank Name _____

ABA/Routing Number _____

Checking Acct Number _____ (attach voided check)

-or-

Savings Acct Number _____ (attach bank proof)

I authorize the Board of Light & Power to pull payments directly from the above indicated account in the amount shown on my monthly electric utility billing statement. The payments will be pulled on the due date shown on the statement. I understand that a \$25 returned item fee will apply if payment is declined for any reason. **This authorization will remain in effect until written notice of termination is given to the Board of Light & Power. Changes cannot be made online.**

Signature _____ Date _____

Email address _____ Daytime phone _____