



CITY OF DENISON UTILITIES DEPARTMENT

430 W. Chestnut | Denison, TX 75020 | www.cityofdenison.com | 903.465.2720 | 903.465.1276 FAX

CREDIT CARD DRAFT AUTHORIZATION FORM

ACCOUNT INFORMATION

Water Account Number: _____
Name on Water Account: _____
Utility Service Address: _____

CREDIT CARD DRAFT INFORMATION

Credit Card Number: _____
Credit Card Type (please choose): VISA / MASTERCARD _____
Expiration Date: _____
Name on Credit Card: _____
Credit Card Billing Address: _____

Phone Number (optional): _____

Before signing this form, please verify that the information you have provided is correct. Any errors in this information will result in your payment(s) not processing successfully and this could cause a disconnection of your service. The City of Denison is not responsible for any errors that are provided on this form.

By signing this form you are authorizing the City of Denison to charge the account above for water utility charges as indicated on the notice that you receive.

Signature

Date