



PO Box 1130
146 Faculty Street Ext.
Boone, NC 28607
Office (828) 264-3671, Fax (828) 262-6726

AUTHORIZATION FOR BANK DRAFT

*****PLEASE INCLUDE A VOIDED CHECK WITH THIS FORM, THANK YOU*****

ADD: _____ CANCEL: _____ CHANGE: _____

DATE: _____

CYCLE: _____ (office use only)

NAME ON ELECTRIC BILL: _____

ACCOUNT NUMBER ON ELECTRIC BILL: _____

SERVICE ADDRESS: _____

I hereby authorize New River Light & Power Company to draw monthly drafts from my bank account for payment on my monthly electric bills. I authorize New River Light & Power Company to honor such drafts until I may notify you in writing that I will withdraw this request.

BANK NAME: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

CUSTOMER SIGNATURE: _____