



GOLDEN TRIANGLE
Planning and Development District, Inc.

User Account #:

Billing Office
P.O. Drawer 1008
Starkville, MS 39760-1008

Bank Draft Authorization

Name:

Address:

City:

State:

Zip:

E-Mail:

Phone#:

This authorizes the Golden Triangle Planning and Development District to draft my checking account each month. This draft is payment for Utility User Fees.

A Void Check or a Canceled Check is enclosed for Bank Routing and Account Information.

Signature: _____

Date:

Note: Drafts are processed monthly on the 15th.