

# New Commonwealth Natural Gas

## BANK DRAFT AUTHORIZATION

Automatic bank drafting from your checking or savings account assures that your bill is paid in full and on time every month, even if you are out of town. This convenient recurring process is free.

**How Do I Begin the Process?** To become a bank draft customer, we need two things: the completed bank draft authorization form on the next page and a “voided” check from your checking account or a withdrawal slip from your savings account. We will work with your bank to draft your checking or savings account each month.

**When Will My Account Be Drafted?** The initial set-up for the bank draft will take approximately two weeks. Please continue to pay your bill as normal until your bill states “BANK DRAFT – DO NOT PAY”. After enrollment in the program, your account will be drafted for the exact amount of your bill on the due date of your account. You will receive a monthly statement by mail on which your bank draft confirmation message appears.

**What Happens if I Have Questions About My Bill?** If you have a question about your gas bill, call New Commonwealth Natural Gas (NCNG) Customer Service Center at (833)539-6721

**What Happens if There is Not Enough Money in My Account?** The automatic bank draft will be presented to your bank once for processing. If your financial institution does not pay the draft because of insufficient funds and returns it to the Authority, your account will be charged a return check fee (\$25) and processed in the same manner as an insufficient funds check. If a payment is declined by your financial institution on more than one occasion it will be left to the discretion of the New Commonwealth Natural Gas (NCNG) staff to remove the account from the bank draft.

**How Do I Cancel My Participation?** If you decide to discontinue participation in the bank draft program, you may fill out a bank draft cancellation form and submit it to the New Commonwealth Natural Gas (NCNG) Customer Service Center.

By Mail: PO Box 590, Wickliffe, KY 42087

In Person: 311 Court Street, Wickliffe, KY 42087

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## BANK DRAFT AUTHORIZATION FORM

Please complete the following information:

### Section A

Customer Name: (last, first) \_\_\_\_\_

Customer Account #: \_\_\_\_\_

Customer Service Address: \_\_\_\_\_

Customer Mailing Address: \_\_\_\_\_

Customer Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

### Section B

NCNG is authorized to debit my (check one):

☐ **Checking Account** or ☐ **Savings Account**

Bank Name \_\_\_\_\_

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

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

I authorize New Commonwealth Natural Gas (NCNG) to debit my checking or savings account for my gas charges, on the due date each month. **I have included a voided check or savings withdrawal slip** for this purpose. I further understand that this authorization is in effect until New Commonwealth Natural Gas (NCNG) is notified that I or an authorized person no longer desires this service, allowing them reasonable time to act upon my notification. I also understand that if corrections to my account are necessary, they will be reflected on the next billing. I understand that non-payment due to insufficient funds in my account will be processed by my financial institution and the Authority in the same manner as an insufficient funds check, and that I may be charged an insufficient funds fee (**\$25**) by both. I understand that this authorization is non-negotiable and non-transferable.

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature\* \_\_\_\_\_ Date \_\_\_\_\_

**\*If the name on the bank account is different than the customer service name both persons must sign this form AND an "Authorized Person" form must be completed and attached. Also, if at any time the draft needs to be cancelled either party can cancel by filling out a Bank Draft Cancellation Form.**

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Office Use Only Month change is effective (if applicable) \_\_\_\_\_ Clerks Initials \_\_\_\_\_

# New Commonwealth Natural Gas

## AUTHORIZATION PERSON FORM

### Authorized Person on Service Account:

Name of Service Customer: (last name, first name)

\_\_\_\_\_

Service Address:

\_\_\_\_\_

Service Account #: \_\_\_\_\_

### Authorization is being given to:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

DL# (used for verification purposes): \_\_\_\_\_

Relationship with Service Account Holder:

Parent/Guardian/Other (please list): \_\_\_\_\_

By signing this agreement, I am authorizing the above individual(s) to have access to my account with New Commonwealth Natural Gas (NCNG). This shall include but not be limited to the following:

Service status and information, billing and payment questions, and bank information for the purpose of setting up or taking off bank draft.

I also understand that the above stated individual(s) shall be allowed access until I remove them.

Signature (service customer) \_\_\_\_\_ Date: \_\_\_\_\_

Signature (authorized user) \_\_\_\_\_ Date: \_\_\_\_\_