BANK NAME

[ ]

BANK LOCATION

[ ]

BANK ROUTING NUMBER

[ ]

BANK ACCOUNT NUMBER

[ ]

WATER ACCOUNT NUMBER

[ ]

↑ *Please attach a VOIDED CHECK from the account that you wish this bill to be paid.*↑

DIRECT BANK PAYMENT AUTHORIZATION FOR CITY UTILITY SERVICES

RETURN TO: CITY OF MANCHESTER, IOWA│208 E Main Street │Manchester, IA 52057 │jschmitz@manchester-ia.org

CUSTOMER INFORMATION

NAME:

ADDRESS: PHONE:

EMAIL ADDRESS: ☐ ENROLL ME PAPERLESS BILLING

ACKNOWLEDGEMENT

☐ My utility payment will be deducted on the 10th day of the month, or the closest business day following the 10th.

☐ It is my responsibility to notify the City of any changes to my automatic withdrawal, including but not limited to changes in banks, account numbers, address changes, etc.

☐ I will be charged a $30 overdraft fee for a returned ACH payment.

I (we) hereby authorize and request the City of Manchester ("City"), to effect payment for City utility services at the address noted above by initiating debit entries to my (our) account in the financial institution named on this form hereinafter called BANK. BANK is hereby authorized, as a convenience to me, to pay and charge to my account, checks drawn on my account by and payable to the order of the City of Manchester for the payment of my water, sewer, garbage, landfill and compost billing, provided there are sufficient funds in such account to pay the same upon presentation. I agree that BANK's right in respect to each such check shall be the same as if it were a check drawn on BANK and signed personally by me. This authority is to remain in effect until revoked by me in writing and until BANK actually receives such notice. I agree that BANK shall be fully protected in honoring any such check. I further agree that if any such check be dishonored, either with or without cause and either intentionally or inadvertently, BANK shall be under no liability whatsoever even though such dishonor results in the forfeiture of my water service.

Customer's Signature   **Date**

DATE RECV'D   **EFFECTIVE DATE:**   **INPUT BY:**