UTILITY AUTOMATIC BILL PAYING AUTHORIZATION FORM

Utility Account Number _____-000

Utility Service Address: _____

BANK NAME AND BRANCH LOCATION	BANK BRANCH PHONE NUMBER:
	(_____) _____ – _____

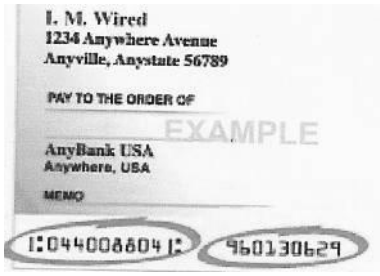
NAME or NAMES ON ACCOUNT:

BANK ROUTING NUMBER (9 digits)

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

ACCOUNT NUMBER (can vary in length)

☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐



routing number is 9 digits

account number can vary in length

ACCOUNT TYPE:

☐ **CHECKING** ☐ **SAVINGS**

PLEASE ATTACH A VOIDED CHECK (NOT a deposit slip)

I hereby authorize the City of Aberdeen to automatically withdraw funds from my account named above and the Financial Institution named above to pay my utility bill directly to the City of Aberdeen. This authority will remain in effect until the City of Aberdeen has received written notification from me of its termination in such time and in such manner as to afford City and Financial Institution a reasonable opportunity to cancel.

AUTHORIZATION (MUST BE SIGNED AND DATED)

_____ _____

PRINTED OWNER/TENANT NAME **PHONE NUMBER**

_____ _____

OWNER/TENANT SIGNATURE **DATE**

Payments will be taken out of the account on the 4th of each month.

- If the money is not available in your account there will be an NSF fee.
- If authorization is not received by the 20th of the month, the automatic payment will start the following month.
- Any questions – please call (360) 537-3210
- Please return completed form and VOIDED check to: Utility Billing – 200 E. Market Street, Aberdeen WA 98520