



City of Bay Village Direct Payment Authorization Form

We are pleased to offer a new service to our residents. The Direct Payment Plan is an option that will allow residents to have payments automatically deducted from their checking or savings account. You can take advantage of this service without changing your present banking institution.

The Direct Payment Plan will help you in several ways:

- It saves time – fewer checks to write and mail.
- Helps pay your bills in a convenient and timely manner – even if you're on vacation.
- Your payment is always on time—it helps maintain good credit.
- It saves postage.
- It's easy to sign up for, easy to cancel.
- No late charges

Here's how the Direct Payment Plan works: You authorize regularly scheduled payments to be made from your checking or savings account using the form attached. Your quarterly payments will be made automatically on:

January, April, July and October 20 or the next business day after

Proof of payment will appear on your bank statement. The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before payment date. You will still receive a quarterly invoice. The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return it to us

- 1) Mark the box before type of account to indicate whether your payment will be deducted from your checking or savings account.
- 2) Fill in your name, financial institution name and date.
- 3) Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number and routing number.
- 4) Include completed form with your October payment or fax to 440-871-5751.

NOTE: Be sure to sign the form and include a contact phone number.



City of Bay Village Direct Payment Authorization Form

Please complete the information below.

I authorize the City of Bay Village to initiate electronic debit entries to my:
_____ checking account (or) _____ savings account

for payment of my Sewer Maintenance and Rubbish Pickup Fees.

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

NAME: (Please print) _____

EMAIL ADDRESS: _____

PHONE: _____

FINANCIAL INSTITUTION NAME (PLEASE PRINT) _____

ACCOUNT NUMBER AT FINANCIAL INSTITUTION _____

FINANCIAL INSTITUTION ROUTING NUMBER _____

SEWER ACCOUNT NUMBER and ADDRESS OF PROPERTY (S) _____

SIGNATURE

Date