

**CITY OF AVOCA
UTILITY AUTOMATIC PAYMENT REQUEST**

NAME: _____ TODAY'S DATE: _____

UTILITY ACCOUNT NUMBER: _____

ADDRESS: _____ PHONE: _____

PLEASE COMPLETE THE FOLLOWING INFORMATION:

BANK NAME: _____

BANK LOCATION: _____

BANK ACCOUNT #: _____

BANK ROUTING #: _____

TYPE OF ACCOUNT: _____ CHECKING _____ SAVINGS

EFFECTIVE DATE: _____

Bills are processed and mailed on the last day of the month.

Automatic payments will be presented to your bank on the 15th day of each month or the following Monday, if the 15th falls on a weekend.

If a draft or automatic bank debit is not honored by the financial institution for any reason when presented the first time, the utility account shall immediately be deemed unpaid and delinquent, as if the customer had no payment at all. Customer shall be notified by ordinary mail that the account is in default by the amount of dishonored draft or automatic bank debit. Utility services will be disconnected as of the date specified in the notice. The notice shall also state the fees that will be due for reconnection of service and dishonored check charge. After such notice, only payment in cash, certified check or money order for the delinquent amount shall be accepted.

The City reserves the right to pursue all their collection remedies available under law and to discontinue automatic payments at any time.

I hereby authorize the automatic payment of my utility billing on the 15th of each month.

Customer Signature

Date