

CITY OF WASHBURN
119 Washington Avenue
P.O. Box 638
Washburn, WI 54891



cityofwashburn.org
715-373-6160
715-373-6161
FAX 715-373-6148

DIRECT DEBIT PAYMENT INFORMATION

Enclosed is the Direct Debit Authorization form to enroll in automatic payment withdrawal for your utility bill.

Attach a voided check or copy of a check from the checking account you wish to have the ACH withdrawal from or call your bank to get the necessary information to have your savings account automatically debited for the utility bill payment.

Direct debit will occur quarterly on the 15th of January, April, July and October. You will receive a quarter-end billing statement with the dollar amount that will be debited from your account prior to the 15th. The utility bill will list *Direct Payment* under *ENTER AMOUNT PAID* and *DO NOT PAY – Direct debit on the 15th* will be above the *SERVICE ADDRESS* area as reminders.

If you change your financial institution or account type, notify the City as soon as possible.

To cancel this authorization, notify our office five days in advance.

If you need further information, contact our office at 715-373-6160 x2.

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DIRECT DEBIT AUTHORIZATION FOR QUARTERLY UTILITY PAYMENT

Date _____

Name _____

Utility Account Number _____

I HEREBY AUTHORIZE THE CITY OF WASHBURN TO CHARGE MY ACCOUNT AT:

Bank _____

Address _____

City, State, Zip _____

Bank Routing Number _____

Bank Account Number _____

Account Type: **Checking** _____ **Savings** _____

Start Date _____

Customer Signature _____

If you change your financial institution or account type, notify the City as soon as possible.

To cancel this authorization, notify the City five days in advance of scheduled payment.

OFFICE USE ONLY

_____ Date ACH created

_____ Prenote removed

_____ Bill message created