



# Algonac

## Utility Payment - Automatic Transfer Authorization

### New or Revision Request

Complete this form and mail it, along with a voided check (deposit ticket slips cannot be accepted), to:

Choose One:  I request to ESTABLISH automatic transfer.  
 I request to MODIFY\* my previously established automatic transfer.

City of Algonac  
805 St. Clair River Dr.  
Algonac, MI 48001

In order to provide convenient bi-monthly payments of my water/sewer bill, I authorize the City of Algonac to transfer funds from my checking account to the City of Algonac as payment for the utility account designated below. The total amount authorized to be transferred will be the amount due on my bill. **I understand that if my bank cannot pay this transfer, my utility account will be considered delinquent.**

PLEASE PRINT

#### Utility Account Information

Name on Utility Account \_\_\_\_\_ Service Address \_\_\_\_\_  
Utility Account # \_\_\_\_\_

#### Financial Institution Information

Name of Financial Institution \_\_\_\_\_ Bank Routing # \_\_\_\_\_  
Address (City, State, Zip Code) \_\_\_\_\_ Checking Account # \_\_\_\_\_  
Telephone Number \_\_\_\_\_ \*Attach required copy of "Voided" check.

#### Financial Account Holder Information

Account Holder's Name \_\_\_\_\_ Driver's License# \_\_\_\_\_  
Telephone Number \_\_\_\_\_  
Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

**\*\*\*THIS FORM CANNOT BE PROCESSED WITHOUT ACCOUNT HOLDER SIGNATURE**

- Automatic transfer authorizations will be affected the billing cycle following receipt of this form. Please continue to make payments until your bill states that payment will be bank drafted stating "ACH DO NOT PAY."
- Payment will be withdrawn from the above noted financial account on the due date and will be noted on the bill.
- **I acknowledge and agree that a \$25.00 insufficient funds fee (NSF) shall be charged in the event funds are not available at the time of withdrawal.** The City of Algonac will attempt to debit the financial account once. If payment is returned NSF, a non-payment fee will be added to the utility account along with late fees. The utility account holder will be responsible for making payment to the Treasury Office within the time given. Automatic payment will resume when the utility account has been made current. If a utility payment is returned NSF for two bill cycles, the utility account will be removed from the automatic transfer plan.
- Please contact the financial institution to verify their ability to process automatic payment prior to submitting this form. Money Market and Investment Accounts are ineligible for this program.
- Submission of a modification request will cancel the previously submitted financial institution / account information.

### Cancellation Request\*

I request to CANCEL my automatic transfer.

Name on Utility Account \_\_\_\_\_ Utility Account # \_\_\_\_\_  
Service Address \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

Please make and keep a copy of this completed form for your records.

\* Requests to modify or cancel automatic transfers must be submitted in writing at least two calendar weeks prior to the next scheduled draft date.