

Authorization for City of Sutherlin Electronic Bill Payment

Customer Information

Name _____

Address _____

City _____ State ____ Zip _____

City Account #(s) _____

Daytime Phone: () _____

Bank Information

Name on acct _____

Name of Bank _____

City: _____ State ____ Zip _____

Bank address _____

Account # _____

Routing # _____

(The 9-digit # between the two columns on bottom of your check)

Terms of Agreement

I certify that I have an account at the financial institution named and for all debit transactions have funds sufficient to pay such entries. I authorize the City of Sutherlin to initiate electronic debit or credit entries to my bank account to pay water and sewer bills for the above listed utility account(s). I also understand that if corrections of the entry are necessary for any reason, including insufficient funds, an adjusting entry will be made to my bank account and to my utility account and a late fee (or other applicable fees) may be applied in accordance with section 13.04.080 of the Sutherlin Municipal Code. I understand my direct electronic payment of the bill amount will be debited on the due date indicated on my bill statement, which will be mailed to me by the City of Sutherlin as usual.

Signature _____

Name (Printed) _____

Date _____

Signature _____

Name (Printed) _____

Date _____

(Joint accounts require the signature of all persons having authority over the account).

*Attach a **voided** or **cancelled check** from the checking account you will be using, or a **voided deposit slip** from your savings account.