

VILLAGE OF DICKEYVILLE
AUTOMTIC PAYMENT AUTHORIZATION

Authorization for setup of Automatic Payment

I hereby authorize the Village of Dickeyville to deduct my utility payments from my deposit account currently held at:

Name of Depository Financial Institution: _____

Address: _____

City, State, and Zip Code: _____

Type of Account (checking or savings): _____

Account #: _____

Routing (ABA)#: _____

***Attach a voided check if available**

I understand that if there are insufficient funds in the account to meet the required utility payment, the payment will not be paid. I further understand that the Village of Dickeyville may terminate this payment authorization at any time, with or without cause. This authorization will remain in effect until written notice of termination is given to the Village of Dickeyville.

Resident's Name: _____

Address: _____

City, State, Zip: _____

Phone Number: _____

Water Account Number _____

Authorized Signature

Date

The Dickeyville Water & Sewer Department is offering you the opportunity to have your water and sewer bills automatically withdrawn from your bank account. The billing will be monthly. The due dates for payment will be the 20th of that month. You will be sent a statement the same as you are now so you know how much your bill will be. It will state on the statement "DO NOT PAY" "AUTO PAY"

If you prefer not to use this ACH Direct Payment, you may continue pay your bill as you now do.

Please return the above authorization with your next payment. The ACH Authorization will remain in effect until I notify you in writing to cancel it in such time as to afford the Village of Dickeyville a reasonable opportunity to act on your request, be in effect for your next billing payment.

Contact Information: Donna K. Timmerman

Village of Dickeyville

PO Box 219

Dickeyville, WI 53808

Phone: 608-568-3333