



UTILITY BILL

DIRECT PAYMENT AUTHORIZATION

We are pleased to provide our residents with the convenience of a direct payment plan for your monthly utility bill (water, sewer, garbage and recycling). You can have your payment deducting automatically from your checking or savings account without changing your present banking relationship.

Direct Payment Plan Offers

- Time savings – fewer checks to write, mail, or deliver
- Convenience – bills get paid even if you’re out of town
- Good Credit Building – payment is always on time
- Additional Savings – no postage, fewer checks to purchase
- Easy – easy to sign up, easy to cancel
- No late fees

How it Works

- Complete and return the lower portion of this form. That’s it!
- Monthly utility bill will be mailed to you specifying the amount to be withdrawn and the date of withdrawal.
- Payments are made automatically on the specified due date. Proof of payment appears on your banking statement.
- Authority to charge your bank account remains in effect until you notify us in writing to terminate the service.
- If payment amount changes, we will notify you at least ten (10) days before the payment date.
- Direct payment plan is dependable, flexible, convenient and easy.

Completing the Form

- Indicate the type of account the payment is to be deducted from.
- Print your name, financial institution name and location, and date.
- Attach a voided check for verification of all financial institution information, or carefully print your complete account number and institution routing number.
- **Be sure to sign the form**
- If you have any questions, please contact us at 608-847-6676.

CITY OF MAUSTON

UTILITY BILL DIRECT PAYMENT AUTHORIZATION

please print legibly

I authorize the City of Mauston to initiate electronic debit entries to my: Checking Account Savings Account for payment of my monthly utility bill (water, sewer, garbage and recycling).

Financial Institution Name

Financial Institution City and State

Account Number at Financial

Institution Routing Number of Financial Institution

City of Mauston Utility Account Number _____

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Signature

Print Name

Date