

VILLAGE OF CHATHAM
Direct Debit Authorization

RECEIVED By Village of Chatham Date _____ Check Attached? YES NO
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Customer Name: _____

Service Address: _____

Mailing Address: _____

(If different than service address)

Phone Number: (7:30a.m. – 4:15 p.m. Mon – Fri) _____

Utility Account # _____

Bank Name: _____

Bank City, State: _____

ABA Routing #: _____

Bank Acct #: _____

Type of Acct: **Checking** **Savings** (Circle one)

ATTACH A COPY OF A VOIDED CHECK FOR THIS ACCOUNT.

I authorize the Village of Chatham (Village) to debit my bank account on the 15th of each month (or the day after if it falls on a weekend or holiday) for all utility payments. Utility payments include water, sewer, and electric services. I understand the method that will be used is the Automated Clearing House system of the Federal Reserve (direct deposit payroll and social security us the same process). This authorization extends to all future payments, and I understand that I must notify the Village in writing to withdraw my authorization. I also agree to notify the Village if my bank account information changes. I accept all responsibility for late payments if I fail to so notify or maintain sufficient funds to cover the utility charge.

Customer Signature

Date

