

UTILITY AUTO PAY AUTHORIZATION FORM

I hereby authorize the Village of Baltimore to initiate debit entries for Direct Pay of my Utility Bills from my account indicated below and the financial institution named below to debit the same to such account. I acknowledge that the origination of ACH transfers to my account must comply with the provisions of U.S. law.

Financial Institution Name

Branch

Routing Number

Account Number

This authority is to remain in full force and effect until the Village of Baltimore has received written notification from me of its termination in such time and manner as to afford the Village of Baltimore and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Printed Name

Phone

Street Address

City

State

Zip

Signature

Date

PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM

Office use only

Account number