



City of Ashtabula Sewer/Trash Automatic Bill Payment Authorization

I hereby authorize the City of Ashtabula Sewer/Trash Billing Department to automatically debit my:

_____ Checking Account (*enclose a voided check*)

_____ Savings Account

Here is my account information:

Account Number

Bank Transit/ABA/?Routing Number

Financial Institution

I understand that this authorization will be in effect until I notify the City of Ashtabula Sewer/Trash Billing Department in writing that I no longer desire this service, allowing it reasonable time to act on my notification. I also understand that if corrections in the debit amount are necessary, it may involve an adjustment (credit or debit) to my account.

I understand that my payment will be debited from my account within 24 hours of the due date stated on my billing statement. I have the right to stop payment of a debit entry by notifying my financial institution before the account is charged. If an erroneous debit entry is charged against my account, I have the right to have the amount of the entry credited to my account by my financial institution, if it is within (15) calendar days following the date on which I was sent a statement of account or a written notice of such entry or 45 days after posting, whichever occurs first. I must give my financial institution a written notice identifying the entry, stating that it is in error and requesting credit back to my account.

Processing typically takes two (2) billing cycles to set up automatic payment. Your bill will say "Do Not Remit – Automatic Payment on Due Date" when amount billed is scheduled to be pulled from the account you designate on this form.

This authorization is non-negotiable and non-transferable.

Name

Address

Utility Billing Account Number

Date

Signature

Phone #

Reminder: Please include a voided check if the deduction is coming from your checking account.

City of Ashtabula Sewer/Trash Billing, 4717 Main Avenue, Ashtabula, OH 44004
(440) 992-7155 or (440) 992-7106, fax (440) 992-9306