



City of Henderson
1044 N Main Street, PO Box 189
Henderson, NE 68371
Ph: 402.723.5782 - Fax 402.723.5785
henderson@mainstaycomm.net

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)
Utility Billing of Water and Sewer

I / we hereby authorize the City of Henderson to initiate debit entries to my account as indicated below. The purpose of this debit to my account is to satisfy the entire outstanding balance for utility service and any related fees, each month for the address indicated below. This authority begins with the next utility bill and is to remain in effect until revoked in writing.

Name: _____

Account Type: Checking Savings

Bank Name: _____

Account Number: _____

Routing Number: _____

Continue to Receive Postcard in Mail: Yes No

Signature of Applicant

Printed Name

Date

Terms of Agreement

Payment Notice, Payment Date and Billing Questions

You will continue to receive a monthly statement which is sent out at the beginning of the month. Funds will be withdrawn out of your account on the 5th of each month. If the 5th falls on a weekend or holiday, your account will be charged on the next business day. Proof of payment will be the billing postcard sent with the stamp of "Paid by Automatic Withdrawal" on it. If you prefer not to receive this postcard, notify City Hall and then your proof of payment will be your regular monthly bank statement.

Availability of Funds

You are responsible for having enough money in the indicated account on the payment date. If the transaction cannot be processed for any reason, a second attempt will be made. You will be responsible for all fees charged should your payment be returned for any non-payment reason. Also, your automatic bank payment service may be cancelled if two payments are returned in a 12 month period for non-payment.

Account / Address Change

Please notify us of any account or address changes to ensure timely payments. You are responsible for submitting a new authorization agreement for direct payment form when an account or address change occurs.

Termination

This authorization will remain in effect until we receive a written notice from you 5 days prior to cancellation date or until your service has been terminated and the final bill is paid in full. You may cancel automatic bank payment service (ACH) by written request or stop by our office and fill out a form.

Please attach a voided check to this form

Office Use Only

Signature of City Staff

Start Date

Today's Date

Date Entered into System