I choose to partake in: (please choose one)

ACH & E-bill☐ E-bill & Check☐ Postcard & Check☐

ACH Recurring Payment Authorization Form

Schedule your payment to be automatically deducted from your checking or savings account.
Just complete and sign this form to get started!

Recurring Payments Will Make Your Life Easier:
- It's convenient (saving you time and postage)
- Your payment is always on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:
You authorize regularly scheduled charges to your checking or savings account. You will be charged the amount indicated on your e-bill each billing period. The charge will appear on your bank statement as an "ACH Debit."

Please complete the information below:

I _____ authorize the Village of Alanson to charge my bank account
           (full name)

indicated below on the 1st of each month for payment of my sewer bill.

Billing Address _____   Phone# _____

City, State, Zip _____   Email _____

Account Type: ☐ Checking   ☐ Savings

Name on Acct _____

Bank Name _____

Account Number _____

Bank Routing # _____

Bank City/State _____

Routing Number   Account Number

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SIGNATURE _____   DATE _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the Village of Alanson in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted periodic payment dates fall on a weekend or holiday, I understand that the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that the Village of Alanson may at its discretion attempt to process the charge again within 30 days, and agree to an additional $2 charge for each attempt returned NSF which will be to my next payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I agree not to dispute this recurring billing with my bank so long as the transactions correspond to the terms indicated applied in this authorization form.