

City of Clinton  
Debit Authorization

I (we) hereby authorize CITY OF CLINTON, hereinafter called COMPANY, to initiate debit entries to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to debit the same to such account for sewer, garbage and recycling bill. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

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(Financial Institution Name)

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(Address of Financial Institution)

(City/State)

(Zip)

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(Routing Number 9 digits) \_\_\_\_\_ Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings  
(Account Number) \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and manner as to afford COMPANY and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

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(Customer Name - Please Print)

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(Signature)

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(Customer Phone Number)

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(City Account # / Service Address)

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(Date)

**PLEASE ATTACH A COPY OF A VOIDED CHECK**

The completed form must be received by the Finance Department no less than 14 business days prior to due date of the bill.

**Any NSF return will have a \$2.00 fee along with any other late fees associated. A total of three (3) NSF's within a calendar year will result in the loss of ACH privileges and will require payments to be made in cash, money order, or certified bank check.**