

125 Central Avenue SE, Orange City, Iowa 51041 • 712-707-4885

Utility Auto Payment Request

Name:	Today's Date:	
Utility Account Number:	Phone:	
Address:	Type of Account:	Checking or Savings
Bank:		
Routing #		
Bank Account #		
Please mail or return this form in-person ALONG City Hall, 125 Central Avenue SE, Orange City, Io		K to:
Items must be received in the office by the 8^{th} of the month in		s Autopay processing.
Terms and Conditions:		
 Automatic payments will be presented to your bank on the 15th Should you need to make any changes - we must be notified n If a draft or automatic bank debit is not honored by the financia account shall immediately be deemed unpaid and delinquent, a notified by mail that the account is in default by the amount of disconnected as of the date specified in the notice. The notices After such notice, only payment in cash, certified check or more prevent disconnection, such payment shall be delivered to the on the scheduled disconnect date. The City reserves the right to pursue all other collection remediatime. 	o later than the 8th of the month il institution for any reason when as if the customer had attempted the dishonored draft or automati shall also state the fees that will be ey order in-person for the delingu utility office during normal busing	h. presented the first time, the utility no payment at all. Customer shall be to bank debit. Utility services will be e due for reconnection of service. uent amount shall be accepted. To ess hours but not later than 10:30 am
I hereby authorize the automatic payment of my utility be Customer Signature	illing on the 15th of each mo	
For office use only: Completed by: Start ACH Date:		