Village of St Nazianz

Direct Payment Form

St. Nazianz Utilities offers a direct payment service. You can have your utility payment deducted automatically from your checking or savings account. And, you won't have to change your present banking relationship to take advantage of this service.

The Direct Payment Plan will help you in several ways:

- It saves time fewer checks to write.
- Helps meet your commitment in a convenient and timely manner --- even if you're on vacation or out of town.
- No lost or misplaced statements, your payment is always on time it helps maintain good credit.
- It saves postage.
- It's easy to sign up for, easy to cancel.
- No late charges.

Here's how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the specified day. And proof of payment will appear with your statement.

The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before the payment date.

The Direct Payment Plan is dependable, flexible, convenient, and easy. To take advantage of this service, complete the authorization form below and return it to the Village Office by mail or place it in the drop box at 110 Colonial Drive.

All you need to do is:

- 1. Check the box to indicate whether your payment will be deducted from your checking or savings account.
- 2. Fill in the date, your name and financial institution information.
- 3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number and routing number.

AUTHORIZATION FOR DIRECT PAYMENT

I authorize the *Village of St Nazianz* to initiate electronic debit entries to my:

□ Checking account □ Savings account

For payment of services. I understand I will receive a notice if the amount changes. I acknowledge that the origination of ACH transactions to by account must comply with the provisions of US law. This authority will remain in effect until I have cancelled it in writing.

Date	Name	 	
Financial Institution Name (Please	Print)	 	
Financial Institution City and State			
Account Number at Financial Insti	tution		
Financial Institution Routing/Tran	sit Number (ABA)	 	

Signature of Authorized Signer

PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS

RETURN COMPLETED FORMS TO:

Village of St Nazianz 228 W Main Street PO Box 302 St Nazianz WI 54232 920-773-2471