



CITY OF WATERTOWN
AUTHORIZATION AGREEMENT FOR ACH DEBIT PAYMENT PLAN

Please Check One: [ ] Enroll [ ] Withdraw [ ] Change Bank Account

Account Name: \_\_\_\_\_

Water/Sewer Account Number(s): \_\_\_\_\_

Refuse Tote Account Number(s): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address: \_\_\_\_\_

I authorize the City of Watertown to initiate debit entries to my bank account indicated below and the financial institution named below, hereinafter called Financial Institution, to debit the same to such account. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. Law. I understand it is my responsibility to continue to pay my future bills via check, money order or cash until I receive the first bill which indicates that the payment will be made by my bank.

If my ACH transfer is declined by my bank, I am aware the City of Watertown will assess a \$20 returned item fee.

Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Bank Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

Account Type: [ ] Checking [ ] Savings

This form is to remain in full force and effect until the City of Watertown has received a written notification from me of its termination in such time and manner as to afford the City of Watertown and Financial Institution a reasonable opportunity to act on it. I agree that I am obligated to the City for services, applicable late fees, and insufficient funds charges, in the event, that a charge to my account is dishonored, for whatever reason, and the City retains its normal collection rights. I understand that if I move, my final bill on this account will NOT be paid through this ACH payment program and the bill will need to be paid via check, money order or cash.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For new enrollments or changes to bank account information, please attach a voided check (checks without a name printed on them will not be accepted) or savings withdrawal slip to this form and send to:

City of Watertown
245 Washington Street, Room 203
Watertown, NY 13601