



# PAW PAW TOWNSHIP

114 N. Gremps Street, Paw Paw, Michigan 49079  
( 269 ) 657-4340  
[www.pawpawtownshipmi.gov](http://www.pawpawtownshipmi.gov)

## **ACH Instruction Form for Automatic Sewer Bill Payments**

Paw Paw Township offers free Automatic Checking Withdrawal Transactions for bill payments to all residential and commercial sewer residents. Automatic transaction is a way of paying your sewer bill with ease, at no extra cost to you, and on time, every time. Whether you are busy working, going on vacation, or just looking to simplify your bill paying, automatic sewer payments is the right choice for you.

### **Automatic Sewer Bill Payment Process**

You will receive a sewer bill quarterly that shows the amount that will be withdrawn from your selected banking account. Withdrawals will be scheduled quarterly on the 20<sup>th</sup> of the month that the bill is due with the transaction occurring on the due date.

To begin this process, simply *complete* this **authorization form along with a voided check** and return documents to *Paw Paw Township*.

### **Just 3 Easy Steps and It's Free!**

1. Fill out the authorization form.
2. Write "VOID" across the face of a check or make a copy of your official bank card. Each person listed on the bank checking account will need to sign the authorization agreement. We cannot process this form without this information.
3. Return the completed authorization form with your voided check to Paw Paw Township, 114 N. Gremps Street. Come during office hours Monday-Wednesday 8am-3pm, Thursday 8am-11 am or use our locked drop box located at the front of our business.



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## AUTOMATIC SEWER BILL AUTHORIZATION FORM

### PRE-AUTHORIZED PAYMENT (ACH DEBIT)

### AUTOMATIC FUNDS TRANSFER AUTHORIZATION & ENROLLMENT FORM

#### RESIDENT INFORMATION

Name \_\_\_\_\_ Utility Acct # \_\_\_\_\_

Service Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_

Phone No. \_\_\_\_\_ Email \_\_\_\_\_

Mailing Address (if different than above): \_\_\_\_\_

#### FINANCIAL INSTITUTION INFORMATION \*\*\*ATTACH A VOIDED CHECK OR SAVINGS WITHDRAWAL SLIP\*\*\*

Name of Financial Institution \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone No. \_\_\_\_\_ 9-digit ROUTING NUMBER: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_ Type: \_\_\_\_\_ Checking \_\_\_\_\_ Savings

Print Name(s) on account: \_\_\_\_\_

I, \_\_\_\_\_, hereby authorize the Paw Paw Township to automatically withdraw from my account identified above the total amount on my utility billing statement. I authorize the financial institution named above to accept such transactions initiated by Paw Paw Township. The withdrawals shall be made from my account on the due date indicated on each billing statement. This authorization is to remain in effect until Paw Paw Township has received written notification from me (or either of us) of termination at least 10 business days prior to the next regular billing date.

\_\_\_\_\_  
Signature Date \_\_\_\_\_

#### OFFICE USE ONLY

Date received: \_\_\_\_\_ via: \_\_\_\_\_ Mail \_\_\_\_\_ Email \_\_\_\_\_ In-person \_\_\_\_\_ Drop-box

Received by: \_\_\_\_\_ Service will take effect on: \_\_\_\_\_