



120 First Avenue North  
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**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

I/we, hereby authorize the CITY OF ILWACO, hereinafter called CITY, to initiate debit entries for utility services to my/our account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account, and if necessary, debit entries and adjustments for any credit entries in error. I/we acknowledge that the origination of ACH transactions to my/our account must comply with the provision of U.S. law.

On or after the 20<sup>th</sup> day of the billing month, the CITY may debit the account listed below for the balance due on my/our utility account:

Utility account name		Utility account No.	
Phone		Email	
Depository institution		Branch	
City/state/zip		Type of account	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Routing number		Account number	

*Email required for notification that payment has been received.*

This Authorization is to remain in full force and effect until CITY has received written notification from me (either of us) of its termination. **Forms submitted by the 15<sup>th</sup> of the month will be processed for the next billing cycle. Current month's bill must be paid using other payment options.**

*Please note: Any payment that cannot be processed due to nonsufficient funds will be subject to a \$50.00 Nonsufficient Funds Fee.*

Account Holder \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Account Holder \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE ATTACH A VOIDED CHECK TO THIS FORM**

**AUTHORIZATION REVOCATION**

I/we request CITY OF ILWACO terminate the authorization for the initiation of debit entries for water, sewer and stormwater service to my/our account indicated above. I/we understand that **this notice must be received by the CITY by the 15<sup>th</sup> of the month before the next transmission date.**

Account Holder \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Account Holder \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Date received by City of Ilwaco \_\_\_\_\_ Initialed by \_\_\_\_\_