AUTHORIZATION FOR DIRECT PAYMENT VIA ACH

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

Check one: ☐ Begin Payment   ☐ Change Information

I (we) authorize the city of Clark to electronically debit my (our) account and, if necessary, to electronically credit my (our) account to correct erroneous debits as follows:

☐ Checking Account / ☐ Savings Account (select one) at the depository Financial Institution named below. I (we) agree that ACH transactions I (we) authorize comply with the laws of the United States and all applicable law.

Depository Name: _____

Routing Number: _____ **Account Number:** _____

Name(s) on the Account: _____

Debit transaction frequency:
☐ Single Entry (one-time payment)
☐ Recurring Entries (entries that recur at substantially regular intervals, without further affirmative action by the Receiver)

Date of debit (if Single Entry) or date of first debit: _____

Number of and/or frequency of debits: _____

Authorized debit amount (amount of water/sewer/garbage bill): _____

Date(s) and/or frequency of debit(s): 15th of every month

I (we) understand that this authorization will remain in full force and effect until I (we) notify CITY OF CLARK in writing that I (we) wish to revoke this authorization. I (we) understand that the CITY OF CLARK requires at least 15 days' prior notice in order to cancel this authorization. I (we) understand that if this ACH is returned to the city of Clark for insufficient funds more than three (3) times, this authorization becomes null and void.

Name(s): _____
(Please Print)

Date: _____ **Signature(s):** _____