

# VILLAGE of DEERFIELD

4 N. Main St., P O Box 66, Deerfield, WI. 53531-0066

## AUTOMATIC PAY PLAN OPTION AUTHORIZATION

1. Please enroll my account in Automatic Pay Plan. Complete all sections. Please use a separate form for each account.

Name (as it appears on your bill) \_\_\_\_\_

Billing address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code

2. Your Water/Sewer/Garbage/Recycling Account Number:

  0     0     0   -    \_\_\_  \_\_\_  \_\_\_  \_\_\_  -    \_\_\_  \_\_\_

3. I hereby authorize and instruct my financial institution to deduct the amount of my monthly water, sewer, garbage and recycling utility bill from my account and remit it directly to the Village of Deerfield. The Village of Deerfield will notify my financial institution of the amount to be deducted. This authority is to remain in full force and effect until the Village of Deerfield has received written notification from me (us) of its termination in such time and manner as to afford the Village of Deerfield a reasonable opportunity to act on it.

Please be sure you have read the terms and conditions and have agreed to them before you mail us your signed enrollment form.

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

4.  I have enclosed a void check OR  
 I am using a savings account to enroll in the Automatic Pay Plan.

Checking Account # \_\_\_\_\_ Savings Account # \_\_\_\_\_

Financial Institution's Name \_\_\_\_\_

Financial Institution's Address \_\_\_\_\_

Financial Institution's Phone \_\_\_\_\_

Financial Institution's Routing Number \_\_\_\_\_

(Please check with your financial institution if you need help identifying your bank routing and account numbers.)