Automatic Bill Payment

Please Print

Name of Banking Institution _____ **Bank Routing #** _____

Type of Account **Checking** **Savings** **Customer Bank Account #** _____

Name on Billing _____

Email Address _____ **Cell Phone #** _____

Service Address _____ **Location ID #** _____

I hereby authorize the City of Ellis to charge my bank account each month for the amount of my municipal utility bill or water, sewer and /or sanitation services as provided by the City of Ellis, Kansas, effective with the _____ billing. I further authorize the above named Financial Institution to pay my monthly utility bill by charging each payment to my account. I acknowledge that in case of a water leak, I must contact the City of Ellis prior to the 7th of each month in which the leak was billed to make alternate payment arrangements. Failure to do so may result in a significantly large amount being automatically withdrawn from my bank account. I agree that my Bank's treatment of the City's debit request document shall be the same as if it were signed personally by me. I understand that either the financial institution or the City of Ellis reserves the right to terminate this payment plan. A Non-Sufficient Funds fee will be charged, if applicable. This authorization will remain in effect until revoked by me in writing.

_____ _____

Signature Date

By signing up for our automatic bill payment plan, your monthly utility bill will be electronically deducted from the checking or savings account of your choice on the 10th of each month (or the first working day following the 10th). Your monthly bill will be mailed to you on the first of each month, just as always. You will know your bill will be deducted from your bank account when the words "Do Not Pay – Auto Pay" are printed on the bottom of your monthly bill. **(Please continue to pay your bill until this message appears on your monthly bill).** Should you have any questions regarding your bill, you may call us at 785-726-4812.

Additional Accounts

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____

Service Address _____ **Location ID #** _____