

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

COMPANY: THE CITY OF HEDRICK

_____ I (we) hereby authorize The City of Hedrick to initiate debit entries and if necessary, initiate credit correction or adjustment entries to my (our) account at the financial institution indicated below.

_____ I (we) understand that should the regularly scheduled debit amount vary above the set range; we will receive written notification from The City of Hedrick of the new amount no later than ten (10) calendar days before the scheduled transfer date. If the scheduled date of the debit changes (other than for a weekend or federal holiday when the debit shall occur on the following banking date), I (we) will receive written notice from The City of Hedrick no later than seven (7) calendar days before the new scheduled transfer date.

_____ I (we) have received a copy of The City of Hedrick's ACH Debit Policies & Information

_____ I (we) would like to change my (our) participation in ACH Debits.

_____ I (we) would like to cancel my (our) participation in ACH Debits.

PLEASE ATTACH A VOIDED CHECK OR FINANCIAL INSTITUTION VERIFICATION
LETTER FOR ACCOUNT VALIDATION.

_____ CHECKING

_____ SAVINGS

Bank Name: _____

City: _____ State: _____ Zip: _____

Bank Routing #: _____ Bank Account #: _____

This authorization is to remain in full force and effect until The City of Hedrick has received written notification from me (or either of us) of its termination in such a time and in such a manner as to afford The City of Hedrick, or their appointed third party and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____ Date: _____

Address: _____

Telephone Number: _____ Email: _____

Amount/Range to Debit \$ _____ Recurrence: Monthly

Signature: _____

| | | |
|----------------------------|----------------------|------------|
| FOR OFFICE USE ONLY | | |
| DATE RECEIVED _____ | BEGINNING DATE _____ | |
| UTILITY ACCOUNT # _____ | | |
| ___ ADD | ___ CHANGE | ___ DELETE |

The City of Hedrick's
ACH DEBIT POLICIES & INFORMATION

How do you apply for ACH DEBIT for utility accounts?

Fill out an AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS and return to City Hall. Copies of this form can be found on our website www.hedrickiowa.com under Residents & Payment Options. Return this form and a voided check or financial institution verification letter to City Hall. All forms received by the 5th of each month will be debited for that month, all forms received after the 6th of each month will be debited starting the following month.

When are payments debited?

ALL payments are debited on the 15th of every month. If the 15th falls on a weekend or holiday debits will be made on the first following banking calendar day.

What if I will not have the money in the bank on the 15th?

You will need to contact City Hall by the 5th of the month the payment will be debited to cancel the payment. You will then have to make your payment in another way for that month and ACH Debit will automatically continue for the following month.

All returned payments for any reason will be treated like a returned check and a \$30 service charge will apply. If any two payments that are returned unpaid in a six-month period, The City of Hedrick may cancel ACH Debit Services and require customer to pay via CASH/CREDIT for all future payments.

What if I owe a past due amount?

You may contact City Hall to arrange an amount to be debited above your current amount due each month or make a separate payment in another form every month to go towards your past due amount.

What if I need to change my banking information or cancel ACH Debits?

You will need to fill out a new AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS and check either the change or cancel selection, provide any new information and return to City Hall. City Hall will need to receive all cancelation and change requests by the 5th of the month payment is due to be able to guarantee cancelation or changes for that month.

FOR ALL OTHER QUESTIONS OR INQUIRIES PLEASE CONTACT CITY HALL.