

City of Llano

Direct Payment – UTILITY BILLS

We are pleased to offer you a convenient service – the *Direct Payment* Plan. Your monthly utility bill payment can be deducted automatically from your checking or savings account. And, you won't have to change your present banking relationship to take advantage of this service.

The *Direct Payment* Plan will help you in several ways:

- It saves time-fewer checks to write.
- Helps meet your commitment in a convenient and timely manner-even if you're on vacation or out of town.
- No lost or misplaced bill cards, your payment is always on time-it helps maintain good credit.
- It saves postage.
- It's easy to sign up for, easy to cancel.
- No late charges.

Here's how the *Direct Payment* Plan works:

You authorize your monthly utility bill from the City of Llano to be paid from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the 15th day of each month. The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. The *Direct Payment* Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete the attached authorization form and return to us.

All you need to do is:

1. Mark the box before type of account to indicated whether your payment will be deducted from your checking or savings account.
2. Fill in your name, financial institution name and location date.
3. Attach a voided check for verification of all financial institution information. If you are unable to attach the voided check, please fill in your account number and routing number.
- 4.

NOTE: BE SURE TO SIGN THE FORM!

AUTHORIZATION FOR DIRECT PAYMENT

I authorize the City of Llano to initiate electronic debit entries to my:

Checking account or Savings account

for payment of my utility bills. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Date: _____

Financial Institution Name (please print): _____

Account Number at Financial Institution: _____

Financial Institution Routing/Transit Number: _____

Financial Institution City and State: _____

Signature: _____

STAPLE VOIDED CHECK HERE

PLEASE KEEP A COPY OF THE AUTHORIZATION FOR YOUR RECORDS