

City of Richmond
205 Summit Street
Richmond, MO 64085
(816) 776-5304 (816) 776-8216 – Fax

Authorization for Automatic Utility Bill Pay

What is Automatic Utility Bill Pay? <ul style="list-style-type: none">• Automatic Utility Bill Pay allows you to pay your bills automatically by having payments withdrawn directly from your checking or savings account on the 7th of each month.• You save time by not having to write checks for your bills.• You save money on postage and bill-paying supplies.• You no longer have to worry about your payments being lost or not being able to pay your bills when you are out of town.• Your payments are always on time.	Enrollment is Easy! <p>Simply complete the Authorization for Automatic Utility Bill Payment (below) and mail it with a voided check to ensure accurate processing.</p> How Automatic Utility Bill Pay Works. <p>You will still receive by mail a monthly statement showing the amount due. You will know the exact amount and the exact date your payment will be deducted from your account. If you have any questions about your statement, you will have ample time to call the City and resolve your concerns.</p>
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TERMS AND CONDITIONS OF AUTHORIZATION

1. Authorization To enroll, complete the Authorization for Automatic Utility Bill Pay. NOTE: To ensure accurate processing, include a voided check for each Authorization.	2. Revocation This Authorization shall remain in effect until revoked by the customer, City or financial institution. Customer must notify the City to discontinue automatic payment service.	3. Stop Payment The customer has the right to stop payment of a charge by notifying his/her financial institution in accordance with that institution's guidelines.
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Name: _____

Please print name as it appears on your utility bill

Address: _____

Street Address

City, State, Zip

Phone: _____

Home Phone

Cell Phone

Utility Bill Account Number(s): _____ Please include all accounts to be included on this Automatic Utility Bill Pay.

_____	_____
_____	_____
_____	_____

Financial Institution Information:

Name: _____

Address: _____

Street Address

City, State, Zip

Phone Number

Routing Number: _____ Account Number: _____

I hereby authorize the City of Richmond to charge the above-referenced account(s) on a monthly basis in the full amount of my utility bill and to make the deduction payable to the City of Richmond. I further understand in the event of two denied payments, the City of Richmond reserves the right to discontinue this payment option. In making this Authorization, I further agree to the Terms and Conditions of Authorization as stated above.

DID YOU REMEMBER TO INCLUDE A VOIDED CHECK WITH THIS COMPLETED FORM?

Date

Signature

DID YOU REMEMBER TO INCLUDE A VOIDED CHECK WITH THIS COMPLETED FORM?