

DIRECT DEBIT FORM – SEWER, GARBAGE, COMMUNITY PROTECTION AND WATER SERVICES

The City of Asbury, Iowa has implemented the direct debit payment service for sewer, garbage, community protection and water bills. Participants in the direct debit program will continue to receive a bill, but instead of writing a check, the amount due is deducted electronically from the customer’s checking account on the 15th of each month. If you would like to sign up for this program, please complete the authorization form below and mail or drop off with a voided check to:

City of Asbury
5080 Asbury Road
Asbury, Iowa 52002-2522

Your account information can be found on your monthly utility bill. Be sure to attach a voided check with your form. After the authorization is processed the following note will appear on your bill:

PAID – BANK PAY

This means all information on the authorization has been verified and payment will be automatically debited from your account. To locate your Transit/ABA and account numbers, look to the bottom series of numbers on the face of each check.

John Doe or Jane Doe 123 Anywhere St. Asbury, Iowa 52002	Check #2080 _____ 2010
Pay to the Order of: _____ _____ Dollars	\$_____.00
Bank of Asbury, Iowa For: _____	
079448953 (TRANSIT NUMBER)	877925804 (ACCOUNT NUMBER) 2080

**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED UTILITY PAYMENTS
CITY OF ASBURY, IOWA**

Name: _____ Utility Service Address: _____
Utility Account Number: _____ Phone: _____

I (we) hereby authorize the City of Asbury, Iowa hereinafter called CITY, to initiate debit entries to my (our)
 Checking Account Savings Account (**select one**) indicated below and depository named below, hereinafter called DEPOSITORY, to debit same to such account for payment of monthly sewer, water, community protection and garbage bills.

Bank Depository Name: _____ City/State: _____
Bank Transit/ABA Number: _____ Bank Account No. _____
(9 digit number)

This authority is to remain in full force and effect until CITY and DEPOSITORY have received written notification from me (or each of us) of its termination in such time and in such manner as to afford CITY and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____ Date: _____
Signature: _____