



# SEWER ACH APPLICATION FOR DIRECT PAYMENTS

Please complete and return the form to Village of Centerburg, Drawer D, Centerburg, Ohio 43011, or email it to [utilitybilling@centerburgoh.org](mailto:utilitybilling@centerburgoh.org) along with your voided check or savings deposit slip.

Billing Account Name: \_\_\_\_\_ Service ID: \_\_\_\_\_  
Account Address: \_\_\_\_\_

I/we hereby authorize **The Village of Centerburg** to initiate debit entries to my/our account indicated below at the depository financial institution named below, hereafter called depository, and to debit the same to such account. I/we acknowledge, that the origination of ACH transactions to my/our account must comply with the provision of U.S. Law.

- Checking Account (must provide a voided check)
- Savings Account (must provide a voided deposit slip)

Depository Bank Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

This authorization is to remain in full force and effect until The Village of Centerburg has received written notification from me (or either of us) of its termination in such time and in such manner as to afford The Village of Centerburg and depository a reasonable opportunity to act on it.

Recipients Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Recipients Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_



[www.centerburgoh.org](http://www.centerburgoh.org)