

Office Use Only:

Date Set-Up: _____

Discontinue Date: _____

Reason _____

Authorized By _____

Authorized by: _____

Bellows Falls Village Corporation
Monthly Water & Sewer Payment
Direct Debit Program Sign Up/Change Request Form

New _____ Change _____ Effective Date _____

You may sign up to have your monthly Water & Sewer installments transferred electronically from your bank account to the Bellows Falls Village Corporation. When you sign up for this program, the Village will debit your bank account for the exact amount of the monthly Water & Sewer installment on the actual due date for each installment. You will continue to receive your bill in the mail.

Unless we receive written notification from you at least fifteen (15) days prior to the installment due date, we will automatically debit your account for the amount of the installment on the due date.

You must bring a blank, voided check or deposit slip for the account you wish to have debited when you sign up for the program.

I, _____, herewith authorize the Bellows Falls Village Corporation to debit my bank account listed below in the exact amount of my monthly Water & Sewer installment on the due date of each bill. Said authorization will remain in effect until cancelled in writing. All CANCELLATIONS must be in the Finance/Tax Office at least fifteen (15) days prior to the Water & Sewer installment due date. Said authorization is to be used expressly for payment of my Water & Sewer account(s).

Name on Water & Sewer Account _____

Water & Sewer Account Number _____

Bank Name _____

Bank Address _____

Bank Routing Number (first set of 9 numbers of your account) _____

Bank Account Number (second set of 9 numbers on your account) _____

Is this a Checking Account _____ or Savings Account _____

I hereby acknowledge that I have signature authority on the above listed bank account and agree that sufficient funds will be available in said bank account on the Water & Sewer installment due dates to permit payment of the above account.

I understand that failure to maintain sufficient funds in the above listed bank account will result in the Village assessing interest and penalties on my Water & Sewer Account at rates stated on my Water & Sewer Bill and a \$25.00 service charge for insufficient ACH funds will be assessed per occurrence.

I, also understand that it is my responsibility to notify the Village if there is a change in my bank name or account number. Failure to do so will result in the Village assessing interest and penalties on the overdue Water & Sewer installment as outlined on your bill.

I further agree that this direct debit authorization will remain in effect indefinitely unless, and until I provide at least fifteen (15) days written notice of its cancellation to the Finance/Tax Office.

I, also understand that if I have **three (3) consecutive insufficient ACH direct debit attempts** from my account, my ACH Direct Debit program will be cancelled by the Bellows Falls Village Corporation.

Please cancel direct debit when your property is sold or transferred.

Signature _____

Date _____

Printed Name _____

Daytime Phone _____

Email _____