



# CITY OF HIGHLAND

5378 West 10400 North, Highland , Utah 84003  
Telephone: 801-756-5751 Fax: 801-756-6903

## DIRECT PAY AUTHORIZATION

Every month, the City of Highland will debit your personal checking/savings/share draft account for the total amount of your City utility billing. You will continue to receive your City utility billing as you normally would; however, no manual payment will need to be made as the full amount due will be electronically deducted from your account on the 10th or the 20th of each month, whichever of these two dates you choose.

**As a participant of Direct Pay, I agree to and/or understand all of the following:**

1. If my account is past due upon set up, I authorize the City of Highland to debit the entire past due amount.
2. I authorize the City of Highland to debit my checking or savings account for the monthly charges on the specified date for utility services.
3. I will ensure that sufficient funds are in my checking or savings account to cover my bill.
4. Two refused electronic fund transfers may cancel this agreement at the option of the City of Highland.
5. I will promptly notify the Highland City of any change to my checking or savings account. If a change occurs, it is my responsibility to provide the City of Highland with the current account information.

### ACCOUNT INFORMATION

(Bank, Savings and Loan, Credit Union)

Financial Institution: \_\_\_\_\_

Account Type: (check one)

Transit/ABA Number: \_\_\_\_\_

(Usually the first 9 digits on the bottom of your check)

\_\_\_\_\_ Savings

\_\_\_\_\_ Checking or Share Draft

Withdrawal Date: 20<sup>th</sup> of each month  
or next business day

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

**IMPORTANT: Please attach a voided check to this form. (Do not give a Deposit Slip)**

### AUTHORIZATION

I hereby authorize the City of Highland to initiate debits (payments) or credits (corrections) to the financial institution indicated above for the purpose of paying my monthly utility bill with the City of Highland . The financial institution is authorized to debit/credit my account. This authority is to remain in full force and effective until either I revoke it by giving 15 days prior written notice to the City of Highland, it is canceled by the City under the conditions stated above, or upon termination of my service with the City of Highland. I have also read and agree to the terms and conditions outlined above.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Customer Name (Please print)

\_\_\_\_\_  
City Utility Account Number

### OFFICE USE ONLY

\_\_\_\_\_ Start      \_\_\_\_\_ Change      \_\_\_\_\_ Cancel

Effective Date: \_\_\_\_\_

\_\_\_\_\_  
Accounting Staff

\_\_\_\_\_  
Entry Date

\_\_\_\_\_  
Entered by: