

## Sandusky County Sanitary Engineers

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Steven F. Shiets, P.E. Sanitary Engineer

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## APPLICATION AND AUTHORIZATION FOR AUTOMATIC BILL PAYMENT

Please complete <u>ALL</u> sections and return this form with a voided check.

I (we) authorize the Sandusky County Sanitary Engineer to instruct my banking/savings institution to initiate debit entries for my sanitary sewer and/or water utility bill and to initiate, if necessary, credit entries and adjustments for any entries in error to my account listed below.

## PLEASE PRINT

BANKING INFORMATION	)N: (Bank, Sa	vings & L	oan, Credi	it Unio	n, etc.)
Financial Institution:					
Address:	o +				_ State:
Phone:				111	
Please Check One:	Checking	□ Sa	avings		
Routing Number:	Account Number:				
** PLEASE	ATTACH A V	OIDED C	IECK FOR	VERI	FICATION **
This authorization is to re received written notificati such manner as to afford reasonable opportunity to the account.	on from me (or I the Sanitary E	either of ungineer's	us) of its ter office and t	rmination the Fin	on in such time and ancial Institution a
Date:		Pł	none:		
Printed Name (as shown	on bill):				v
Service Address:					
E-mail:					
SIGNATURE(S):					
				(If Joint	: Account)
** Please continu	e to pay bill u	ntil notific	ation is m	ade o	n your utility bill. *
♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦ ♦ DO NOT WRITE BELOW - SANI	◆ ◆ ◆ ◆ ◆ ◆ ↑ TARY ENGINEER'S	♦ ♦ ♦ ♦ SOFFICE US	<b>♦ ♦ ♦ ♦ ♦</b> E ONLY	<b>* * *</b>	* * * * * * * * * *
☐ Voided Check	ACCOUNT	NUMBER:	Book:		Account:
	Data Enter	od.			