

Borough of Lavallette ACH Form



Authorization Agreement for Direct Payments of (Please Check One or All That Apply):

Taxes \_\_\_\_\_ Water/Sewer \_\_\_\_\_ Electric \_\_\_\_\_

All ACH Debits will be withdrawn from accounts on the due date of the bill. \_\_\_\_\_ Initial

Name(s): \_\_\_\_\_

Property Address: \_\_\_\_\_

I (we) hereby authorize the Borough of Lavallette, to initiate debit entries to my (our)  Checking account /  Savings Account (select one) indicated below at the depository financial institution named below, hereinafter 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 provisions of US law.

Depository Name: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

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

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

\_\_\_\_\_ Date \_\_\_\_\_ Phone Number \_\_\_\_\_ Signature \_\_\_\_\_

**NOTE: DEBIT AUTHORIZATIONS MUST PROVIDE THAT RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.**

**INSUFFICIENT OR RETURNED ITEMS ARE SUBJECT TO A \$25.00 FEE PER ORDINANCE # 2008-02(1030).**

Attach a void check or savings deposit slip here:

**Office Use Only**

**Tax:** Block \_\_\_\_\_ Lot \_\_\_\_\_ Qual. \_\_\_\_\_ Date Processed \_\_\_\_\_

**Water/ Sewer:** Account Number \_\_\_\_\_ - \_\_\_\_\_ **Electric:** Account Number \_\_\_\_\_ - \_\_\_\_\_

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