



ACH PAYMENT AUTHORIZATION FORM

Schedule your payment to be automatically deducted from your checking or savings account. Just complete and sign the form to get started!!

Recurring Payments Will Make Your Life Easier:

It's convenient (saving you time and postage)

Your payment will always be on time (even if you're out of town), eliminating late charges

Here's How Recurring Payments Work:

You authorize regularly scheduled debits to your checking account. Your account will be debited the amount indicated on your billing statement.

Note: You must provide notification at least 21 days prior to your due date of any changes to your ACH account information.

Please complete the information below:

Customer Account # _____

I _____ authorize the City of Nevis to debit the bank account
(full name)

Indicated below on the dates between the **6th and 8th** of each month for my payment obligations.

Billing Address _____ Phone: _____

City, State Zip _____ Email: _____

Account type: Savings _____ Checking _____

Name on Account: _____

Bank Name: _____

Bank City, State, Zip: _____

Routing Number: _____

Account Number: _____

Signature: _____ Date: _____

I (we) agree to have funds available in my (our) account on the designated dates(s) to affect this transfer.

In the case of payment being rejected for Non-Sufficient Funds (NSF), I understand that the City of Nevis may, at their discretion, attempt to process the charge again, and I agree to an additional charge of \$30.00, which will be initiated as a separate transaction from the authorized payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I will not dispute The City of Nevis's billing with my bank so long as the transaction corresponds to the terms indicated in this agreement.