
Direct Payment Via ACH

DEBIT AUTHORIZATION FORM

Direct Payment via ACH is the transfer of funds from a consumer account for the purpose of making a payment.

I (we) hereby authorize the City of New Martinsville Municipal Utilities to initiate entries from my (our) checking/savings accounts at the financial institution listed below (THE FINANCIAL INSTITUTION), and, if necessary, initiate adjustments for any transactions debited in error. This authority will remain in effect until the City of New Martinsville Municipal Utilities is notified by me (us) in writing to cancel it in such time as to afford the City of New Martinsville Municipal Utilities and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Name of Financial Institution)

(Address of Financial Institution - Branch, City, State, & Zip)

(Signature)

(Date)

(Name - PLEASE PRINT)

(Address - PLEASE PRINT)

(Phone Number – Home)

(Phone Number – Cell)

If the account is a joint account both parties must sign in order to sign up.

(Signature)

(Date)

(Name – PLEASE PRINT)

Financial Institution Routing Number: _____

Checking/Savings Account Number: _____

These numbers are located on the bottom of your check as follows:

Ⓜ 123456789 Ⓜ 1234567890123 Ⓜ
Routing Number Account Number

Please attach a voided check.

Municipal Utility Account Number(s) _____

The funds will be withdrawn from the account the 15th of every month. When we withdraw the funds from your account if you do NOT have the money in the account you will be charged a **\$25 Fee**. You will then need to come to our office to pay your current bill plus the \$25 Fee by the 20th of that month by cash or money order. If this happens a second time you will be dropped from the program, will still be charged a fee, and we will no longer accept personal checks.