

City of Angola Utilities
210 N Public Square
Angola, IN 46703
(260)665-3422
coautilities@angola.in.gov

ACH Recurring Payment Authorization Form

Schedule your payment to be automatically deducted from your checking or savings account. Complete and sign this form to get started!

Recurring Payments

- It's convenient by saving you time and postage.
- Your payment is always on time even if you are out of town, eliminating late charges

How Recurring Payments Work

You authorize regularly scheduled debits to your checking or savings account. You will be charged the amount indicated on your monthly utility bill. To begin recurring payments, complete this form and return to City of Angola Utilities.

I _____ authorize **City of Angola Utilities** to charge my bank account
(print name)

indicated below on the 20th of each **month** for payment of my utility bill.

Account Number: _____

Service Address: _____ Phone# _____

City, State, Zip _____ Email _____

Account Type: ☐ Checking ☐ Savings

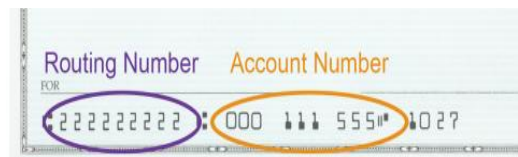
Name on Acct _____

Bank Name _____

Account Number _____

Bank Routing # _____

Bank City/State _____



I understand that this authorization to **City of Angola Utilities** will remain in effect until I cancel it in writing. In addition, I agree to notify **City of Angola Utilities** of any changes in my account information or termination of this authorization at least 30 days in advance. If the above noted periodic payment date falls on a weekend or holiday, I understand that the payment will be executed on the next business day. I understand that because this is an electronic transaction, these funds will be withdrawn from my account. I acknowledge that the origination of ACH transactions to my account must comply with provisions of United States law. I agree not to dispute this recurring payment with my bank as long as the transactions correspond to the terms indicated in this authorization form.

SIGNATURE: _____

DATE _____