



Village of Mahomet

503 E. Main Street - P.O. Box 259 - Mahomet, IL 61853-0259
 phone (217) 586-4456 fax (217) 586-5696

DIRECT DEBIT AUTHORIZATION FORM

I hereby authorize the Village of Mahomet to initiate debit entries to my account indicated below and the financial institution named below hereinafter called FINANCIAL INSTITUTION, to debit the same to such account for **water and/or wastewater payments**. I acknowledge that the origination of ACH transactions to my account must comply with the provision of U.S. law.

FINANCIAL INSTITUTION:	BRANCH:
BANK ADDRESS:	BANK PHONE NUMBER:
ROUTING NUMBER:	ACCOUNT NUMBER:
TYPE OF ACCOUNT: CHECKING SAVING	

This authority is to remain in full force and effect until the Village of Mahomet has written notification from me of its termination in such time and manner as to afford the Village of Mahomet and FINANCIAL INSTITUTION a reasonable opportunity to act upon the change.

PRINT INDIVIDUAL NAME

PHONE NUMBER

SIGNATURE

ADDRESS

DATE

FOR OFFICE USE ONLY	
ADDRESS OF INDIVIDUAL:	_____
W/S ACCOUNT NUMBER :	_____
SET-UP COMPLETE:	INITIAL _____