



Complete and Return to:

City Collector
City of Jackson
101 Court Street
Jackson, MO 63755-1807

This document authorizes the City of Jackson, Missouri, to automatically deduct payments for utility bills from the customer's designated bank and account number. The customer will be sent a utility bill (designated as an automatic bank withdrawal) at the beginning of each month.

The effective date of the transaction will be the 20th of the month or the next business day following the 20th of the month, if the 20th falls on a weekend or a holiday. Transactions will be posted for the actual amount due on the utility account.

This agreement will remain in effect until the customer notifies us in writing of any changes.

- A customer whose transaction fails to clear the bank will be terminated from this service after two separate returned transactions. A return check fee of \$ 30.00 will be charged by the City. The customer will be blocked from accessing the online payment portal and set to "cash only".
- A customer may choose to terminate this service by notifying the city, in writing, 10 days in advance.
- A customer must notify the City and complete a new authorization form for ANY bank/bank account or utility account/location (address) change. Failure to do so may result in non-payment and therefore additional penalties.

I hereby authorize the City of Jackson to deduct from my designated bank and account number the amount necessary to pay each month's utility bill.

Utility Account Number(s): _____

Name: _____

Property Address(es): _____

Mailing Address: _____

City, State, and Zip: _____

Main Contact Phone Number: _____ SSN: _____

E-mail Address: _____

- If you have multiple City utility accounts, please include a list of additional property addresses/accounts for which you want this service.
- Please attach a voided check or any other material that identifies the routing and account information necessary for ACH transactions at the designated bank. If you provide this information below, please note it is the customer's responsibility to confirm it is accurate, clearly written, and that the account provided allows for automatic withdrawal.

Bank Name: _____

Routing Number: _____

Bank Account Number: _____ Checking _____ or Savings _____

What month would you like your first withdrawal/payment to take place? _____ 20th
(month)

This form must be received at least 10 days prior to this date. Another form of payment must be provided for any balance due prior to this date.

The City of Jackson retains the right to modify the terms of this agreement at any time.

Signature: _____ Date: _____