

218 N. Michigan Ave., Shelby, MI 49455 Telephone: 231-861-4400

## **AUTO-PAY PROGRAM**

Auto-pay allows your Village of Shelby utility bill to be automatically deducted from your checking or savings account when you sign up for the program. Payment will be deducted 25<sup>th</sup> day of the month. If the 25<sup>th</sup> falls on a Saturday or Sunday it will be deducted on the Friday before. You will still receive a bill each month, however rather than writing a check and bringing it in or sending one, it will be automatically withdrawn from your account saving you time and postage. There are no extra fees for signing up for the program. To enroll, please fill out the form below and attach a voided check or deposit slip.

	Please Check One:	New Applicant	Change in Banking Information	
Name:				
Service Addre	ss:			
Billing Address	s, if different:			
Home Phone_		Work Phone	Cell	
Email:			<del></del>	
Name of Finar	ncial Institution:			
Account Type:	:CheckingS	Savings		
Routing Numb	per:	Acco	unt Number:	
<ol> <li>My account</li> <li>The Village month, if the changes to day of their</li> <li>An attempte the event the event the event the edded to Once the adjustment of the receive a particular of the Village the program</li> </ol>	ancel my participation to must be current (\$0.0 of Shelby can withdraw me 25 <sup>th</sup> falls on a Saturemy banking informate month. Any billing distribution to withdraw money that all funds are not incompact and I will be removed from the erwise directed, I agree aper bill in the mail. If take effect approximates of Shelby reserves the mat any time.	n in writing. I understand a coo balance) to enroll in the aw payment for my utility bit day or Sunday it will be with ion or if I decide to cancel me putes must be resolved by twill only take place once and the account at the time of Il be removed from the Auto-Pay will resume. If a utilit he Auto-Pay program. The eto receive my utility bill are femail is unavailable, paper mately 30 days after I enroll e right to cancel or terminate.	program.  Ils from my account listed above, on the hardway on the Friday before. If there by enrollment into this program I will on the 10 <sup>th</sup> day of the month. It will be for the entire balance of the withdraw a non-sufficient funds (NSF) on the program until my account is brown account is NSF more than 2 times in the email address provided and will be bills will continue to be sent.  It the Auto-Pay Program and/or my personners and the first the firs	he 25 <sup>th</sup> of each are any do so by the 5 <sup>th</sup> e account. In ) fee of \$35 will ught current. a 6 month no longer
Signature:			Date:	
Office Use C	Only:	Ento	rod Pur	

\_\_\_Yes

No

Voided Check or Deposit Slip Attached: \_\_\_Yes \_\_\_\_No Prenoted Box Checked: