

Direct Payment Enrollment Form

**Automatic bill processing will occur on your next statement cycle.
Follow these easy steps to maximize your leisure time!**

1. Fill out this form.
2. Please attach a voided check with this form.
3. Allow 30 days for processing.
4. Continue to pay the amount due as usual until your statement indicates "No Payment Due."

Step 1. Complete the contact information requested below (please print):

Name (as shown on your bill): _____

Service Address: _____

Township: _____ State: _____ Zip: _____

Daytime Phone: (____)____-_____

Step 2. Provide the required account information below:

To ensure the correct account number is used for this electronic payment, and to obtain the ABA/routing number, **please contact your financial institution for assistance.** Please check the box next to the account you would like the automatic draft to be deducted from and place the account number in the line provided.

Name of Financial Institution: _____

ABA/Routing Number: _____

(Select One)

Checking Account: _____

Savings Account: _____

Step 3. Select which payment and account number you are requesting automatic payment processing for:

Water & Sewer Statements Account #: _____

Step 4. Provide your signature for authorization:

I authorize the Charter Township of Chesterfield to deduct my payment(s) from the account listed above. **I understand that I control my payments, and if at any time I decide to discontinue this payment service, I WILL NOTIFY THE TOWNSHIP.** I also understand that all information provided will remain confidential.

THIS FORM CANNOT BE PROCESSED WITHOUT A SIGNATURE

Signature: _____ Date: _____