

# Village of Empire

11518 S. Lacore Rd.  
P.O. Box 253  
Empire, MI 49630  
(231) 326-5466

## ACH Payment Authorization Form

Please sign and complete this form to authorize the Village of Empire to make a quarterly ACH debit from your bank account. Once you have completed this form, please attach a voided check of the account you wish us to debit from for verification and security purposes.

By signing this form, you give the Village of Empire permission to debit your account the total amount due as indicated on your water bill. This is permission for quarterly transactions to be debited up to 5 days prior to the due date and does not provide authorization for any additional unrelated debits or credits to your account.

**Written cancellation of this agreement must be submitted to our office within 15 business days prior to the next scheduled debit.**

### Please complete the information below:

I, \_\_\_\_\_, authorize the Village of Empire to charge my bank account indicated below for the total amount due as indicated on my Village of Empire quarterly water bill.

Name \_\_\_\_\_ Water Account # \_\_\_\_\_

Service Address \_\_\_\_\_ Phone # \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Email \_\_\_\_\_

Name on Account: _____
Bank Name: _____
Bank Routing # _____ Account # _____
Bank City/State: _____
Type of Account: Checking / Savings (Please Circle)

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NAME (printed) \_\_\_\_\_

I certify that I am an authorized user of the bank account as stated above and that I have the authority to authorize this payment on the accounts behalf. I understand that because this is an electronic transaction, these funds may be withdrawn from the account as of the due date. In the case the transaction is returned for Non-Sufficient Funds (NSF) I agree to an additional \$20.00 charge, which will be added to your Village water bill account balance. I have certified that the above bank account is enabled for ACH transactions, and agree to reimburse the Village of Empire for all penalties and fees incurred as a result of my bank rejecting ACH debits or credits. Both parties agree to be bound by the NACHA Operating Rules as they pertain to this transaction. I acknowledge that the origination of ACH transactions to its account must comply with the provisions of US law. I agree not to dispute this transaction with my bank or the Village of Empire provided the transaction corresponds to the terms indicated in this authorization form.