



VILLAGE OF YELLOW SPRINGS UTILITY ACCOUNT ACH FORM

Village of Yellow Springs Utilities 100 Dayton St. Yellow Springs, OH 45387 | Phone: (937) 767-7202 Opt. 2 | www.yso.com

ACH AUTHORIZATION FORM

The Village of Yellow Springs offers automatic deductions from your checking or savings account. The deduction will occur on the 15th of each month. You will still receive your monthly bill as you currently do, whether it be via mail or email; it will simply state "Paid Via ACH" on the bottom portion of the bill. If you are interested in signing up for ACH payments, please accurately complete, sign and return this form to the Utility Billing office. *Please note it will take one billing cycle for this to take effect.*

| | | | |
|-----------------------------|-----------------|--|---|
| FINANCIAL INSTITUTION NAME: | | CHECKING ACCOUNT <input type="checkbox"/> | SAVINGS ACCOUNT <input type="checkbox"/> |
| ROUTING NUMBER: | ACCOUNT NUMBER: | | |

I, _____, AUTHORIZE THE VILLAGE OF YELLOW SPRINGS UTILITIES DEPARTMENT TO WITHDRAW FROM MY FINANCIAL INSTITUTION TO MAKE MY UTILITY PAYMENTS FROM THE ACCOUNT LISTED BELOW. I UNDERSTAND THAT I CONTROL MY PAYMENTS AND IF AT ANY TIME I DECIDE TO DISCONTINUE THIS PAYMENT SERVICE, I WILL PROVIDE WRITTEN NOTICE TO THE VILLAGE OF YELLOW SPRINGS UTILITIES DEPARTMENT PRIOR TO THE 10TH OF THE MONTH. I ALSO UNDERSTAND THAT BOTH THE FINANCIAL INSTITUTION AND THE VILLAGE OF YELLOW SPRINGS RESERVE THE RIGHT TO TERMINATE THIS PAYMENT PLAN AND/OR MY PARTICIPATION THERIN.

THIS AUTHORIZATION IS NON-NEGOTIABLE AND NON-TRANSFERABLE

Signature Date

Service Address Best Contact Number

Account Number

FOR OFFICE USE ONLY

Date Received and Entered: _____ Received by: _____

Bill Due Date to Begin: _____ Checked by: _____