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Recurring ACH Payment Authorization

I authorize regularly scheduled charges to my checking/savings account. I will be charged \$73.50. A receipt for each payment will be provided to me at the email listed below and the charge will appear on my bank statement as an "ACH Debit."

I understand that there is a service fee of \$1.75 that goes to the Processing company, this service charge is not applied towards my water & sewer bill.

I _____ (Full Name on account) authorize the City of Backus to process an ACH through my checking/savings account at _____ (Bank Name) for \$73.50 ***along with a service fee of \$1.75*** beginning on _____ (Date) and on this day of the month every month. This payment is for my City of Backus Utility Bill.

Billing Information:

Billing Address _____

Phone _____ Email _____

Bank Details: Checking Savings

Account Name _____ Bank Name _____ Account Number _____
Routing Number _____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify the City of Backus in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that the City of Backus may at its discretion attempt to process the charge again within 30 days, and agree to an additional NSF charge at the rate of which the City is charged for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this bank account and will not dispute these scheduled transactions with my bank; so long as the transactions correspond to the terms indicated in this authorization.

Account Holders Signature

Date

The City of Backus is an Equal Opportunity Provider and Employer