



Direct Debit Authorization for Water and Sewer Utility Billing

I hereby authorize the Village of Forsyth to initiate charges to my account, which is identified below. I also authorize the listed financial institution to make the requested payments. This authorization will remain in effect until the Village of Forsyth has received a written notification from the authorized parties to terminate this payment arrangement and has a reasonable opportunity to act on that notification. I agree that I am obligated to the Village of Forsyth for water and sewer utility services and insufficient fund charges in the event that a charge to my account is dishonored, for whatever reason, and the Village of Forsyth retains its normal collection rights.

Customer Name: _____

Account #: _____ Phone: _____

Service Address: _____

City: Forsyth State: Illinois Zip: 62535

Mailing Address: _____

City: _____ State: _____ Zip: _____

Financial Institution: _____

Address: _____

City: _____ State: _____ Zip: _____

Attach a VOIDED check or deposit slip. If you have multiple accounts a form must be filled out for each account. (No foreign bank, institution, facility or checking accounts outside the Continental United States will be accepted.)

Call your financial institution for this information if you do not know it.

ABA Routing Number: _____

Account Number: _____

Customer Signature: _____ Date: _____

Complete this form and return it to:

Village of Forsyth

301 South Route 51

Forsyth, IL. 62535

217-877-9445