

# City of New Rockford, North Dakota

117 First Street South  
New Rockford, ND 58356-1926

701-947-2461

## DIRECT PAYMENT APPLICATION

I (we) authorize the CITY OF NEW ROCKFORD, ND to initiate electronic debit entries, and if necessary, to initiate any credit entries to correct an erroneous debit to my (our) account to my \_\_\_\_ Checking Account (or) \_\_\_\_ Savings Account for payment of my utility bill.

I (we) acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law.

I (we) understand that is authorization replaces any previous authorization and will remain in full force and effect until Auditor at City Hall has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Auditor at City Hall and depository a reasonable opportunity to act on it.

**Customer Name** \_\_\_\_\_ **Service Address** \_\_\_\_\_

**Account** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

1. Financial Institution & Branch (Please Print) \_\_\_\_\_
2. Financial Institution Routing Number \_\_\_\_\_
3. Financial Institution Account Number \_\_\_\_\_
4. Financial Institution City and State \_\_\_\_\_

Please include a voided check.

Please email me my utility bill at \_\_\_\_\_.

This email will replace receiving my utility bill in the mail.

Payments will be withdrawn on the 10<sup>th</sup> of each month unless the 10<sup>th</sup> falls on a weekend/holiday, then the transaction will take place the next bank business day.

The City of New Rockford will not be held responsible for any overdraft fees associated with ACH transactions.