"One Team, One Town, One Family"

Morenci City Offices
118 Orchard Street
Morenci, MI 49256
(517) 458-6828

City of Morenci
Utility Billing ACH Form / Information Sheet

EVERY FIELD MUST BE COMPLETED; ANY MISSING INFORMATION WILL DELAY THE PROCESS FOR ACH WITHDRAWS

The City of Morenci issues utility bills quarterly during the following months of each year: January, April, July, and October. This form allows the City of Morenci to automatically draw money from your checking or savings account to cover the utility bill for each quarter. The 15th day of the above month or the following Monday after the 15th will be the day the money is pulled from your account to pay for your utility bill. By signing this document, you authorize the **City of Morenci** to directly pull funds from your account (automated clearing house [ACH] withdraw) to pay your utility bill for the address and account listed below from the financial institution you state below. By signing this form and agreeing to ACH withdraws, you agree to hold harmless and indemnify the City of Morenci from any bank overdraft fees that may result from insufficient funds in the account you list below. If the funds are ***not*** collected because of insufficient funds there will be a charge of $32.00. By submitting this form, you understand that this ACH authorization form may be rejected or discontinued at any time. If any of the below information changes, you agree to promptly complete a new authorization agreement. This authorization will be in effect until the City of Morenci receives a ***written*** termination notice from you.

Check one of the following: ☐ Start ☐ Stop ☐ Changing Account

Effective Date: ☐ As Soon As Possible ☐ Future date: _____ / _____ / _____

Type of Account: please check one ☐ Checking (*voided check only, deposit slips are not accepted*) ☐ Savings (*deposit slip only*)

Financial Institution Name
(NAME OF BANK) _____

City: _____ State: _____ Zip: _____ Phone: _____

ABA Bank Routing Number (must be 9 numbers) **Account Number** (not to exceed 17 numbers)

⑆										⑆	⑈																	⑈

(Enter the above information from the bottom of your check or savings deposit slip, do not include the check number)

Account # _____ Property Address _____

_____ _____
Utility Customer Signature (By signing, you agree to the terms specified above by the City of Morenci.) *Date*

_____ _____
Print First, Middle Initial, and Last Name *Contact Phone Number*

YES / NO

_____
Email ***Do you want your utility bill emailed to you?***

The above Utility Customer is required to sign this form to activate ACH withdraws for their utility bill payments. The City of Morenci will retain this document on file.

Approved by the Morenci City Council on May 15, 2017.

www.CityofMorenci.org