



VERMILION UTILITIES DEPARTMENT
5511 LIBERTY AVENUE
VERMILION OH 44089
440-204-2420 phone 440-204-2411 fax
www.vermilion.net

AUTOMATIC PAYMENT PROGRAM

If you would like your bills to be automatically deducted from your checking or saving account, please complete and return this form **(along with a voided check)** to this office. This process will begin the month after this form is received.

CUSTOMER INFORMATION: (please print or type)

Vermilion Utilities Account Number (as shown on bill) _____

Customer Name (as shown on bill) _____

Service Address _____

City _____ State _____ Zip _____

Phone Number _____

I authorize the Vermilion Utilities Department to instruct my bank/savings 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 notify the Vermilion Utilities Department in writing.

Signature: _____ Date: _____

REQUIRED BANKING INFORMATION:

Financial Institution: _____

Financial Institution Phone Number: _____

Routing Number: _____

Account Number: _____

CIRCLE ONE: CHECKING ACCOUNT SAVINGS ACCOUNT

OFFICE USE ONLY:

Date ACH Activated: _____