



## **NO MORE CHECKS TO WRITE! – SOUND GOOD? AND IT'S FREE!!!!**

The City of Hughson is now offering a free optional service to make paying your monthly utility billing more convenient. With Automatic Bill Payment, your recurring utility bills will be paid automatically. This is a free service that eliminates the need for you to write out a check each time a bill is due and it saves the cost of mailing. Your payment is always made on time, so there are no worries about late payments or late fees, even if you are on vacation.

You will still receive your bill as normal to show you your current charges. On or about the **25<sup>th</sup> of the month** the amount shown on your bill will be automatically paid from your checking or savings account.

### **REMEMBER:**

### ***It's Free***

- Once your original application has been processed and is on file, your automatic payment schedule will stay in effect until a cancellation notification is received in our office.
- Automatic payment returned by your financial institution due to insufficient available funds will be treated the same as a return check and will be subject to a \$25.00 charge for the 1<sup>st</sup> occurrence. \$35.00 for the 2<sup>nd</sup> or 3<sup>rd</sup> occurrence.
- returned check charge. In addition, this automatic payment agreement maybe subject to immediate cancellation.
- Refusal of payment by your bank may result in delinquency status, which could lead to a termination of your utility status. **After 2 (two) non-sufficient funds you will be cancelled from Automatic Bill Payment.**
- ***We require written notification in our office by the 10<sup>th</sup> of the current month in order to cancel an automatic payment.***

### **To Enroll:**

Complete the attached enrollment form and return to the City of Hughson along with a voided check to:

7018 Pine Street or  
P.O. Box 9  
Hughson, CA 95326  
(209) 883-4054

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### ***For your information:***

**Date enrollment form sent:** \_\_\_\_\_

**Financial Institution:** \_\_\_\_\_

**Checking /Savings Account #** \_\_\_\_\_ **Voided Check #:** \_\_\_\_\_

*\*Deduct \$ from checkbook on the 25<sup>th</sup> of each month/Remember to check statement for amount to deduct\**



UTILITY DEPARTMENT – AUTOMATIC BILL PAYMENT APPLICATION

Please return application to:

City of Hughson

7018 Pine Street, P.O. Box 9, Hughson, CA 95326

**AUTHORIZATION FOR AUTOMATIC PAYMENT OF UTILITY BILL**

I hereby authorize the City of Hughson to initiate debit entries (and, if necessary, credit entries and adjustments for any debit entries in error) to my account(s) listed below. I also authorize the Financial Institution named below to debit and credit the same entries to such account(s).

**Financial Institution:** \_\_\_\_\_  
**PLEASE ATTACH A VOIDED CHECK**

**Type of Account:**  
**Checking**   
**Savings**

This authorization shall remain in full force and effect until the City of Hughson has received written notification from me of its termination in such time and in such manner as to afford the City of Hughson and the Financial Institution a reasonable opportunity to act on it.

I understand that failure to ensure sufficient funds to cover the debit of my account for the amount listed on my utility bill is sufficient cause for termination of this agreement by the City of Hughson maybe cause to terminate my utility services in such circumstances.

If you have a question about your bill or wish to cancel the automatic bill payment, you must contact the city no later than 10<sup>th</sup> of the current billing month.

\_\_\_\_\_  
Name (as shown on bill) Please Print

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Daytime phone number

\_\_\_\_\_  
Utility Account Number

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Utility Account Number

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Utility Account Number

\_\_\_\_\_  
Service Address

If you have more than 3 accounts, please complete another form  
**\*Return original to City of Hughson – Keep a copy for your records\***

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For City Use Only:

Date Received: \_\_\_\_\_ Voided Check Attached? \_\_\_\_\_ Financial Institution: \_\_\_\_\_

Routing # \_\_\_\_\_ Checking/Savings Account # \_\_\_\_\_

Date Entered: \_\_\_\_\_ Letter Confirming Receipt and Date to Start mailed: \_\_\_\_\_