

Village of Ottoville
P.O. Box 488, 150 Park Drive, Ottoville, Ohio 45876
Phone: (419) 453-3636, Fax: (419) 453-4636

Ronald N. Miller
Mayor

Michelle T. Weyrauch
Fiscal Officer

AUTHORIZATION AGREEMENT FOR AUTOMATIC WITHDRAWAL OF FUNDS FOR WATER & SEWER BILLS (ACH DEBIT)

I _____ hereby authorize the Village of Ottoville, to initiate a debit entry on the 15th of each quarter (January, April, July, and October) for the water & sewer bill from my checking/savings account indicated below at the depository financial institution named below. I acknowledge that the origination of ACH transactions from my account must comply with the provisions of U.S. law.

I also acknowledge that if the debit is returned for insufficient funds, I will be charged the applicable late fees form the Village of Ottoville and any other return fees that they may have been charged.

Name: _____

City: _____ State: _____ Zip: _____

Phone: _____

Routing Number: _____ Account Number: _____

Bank Name: _____

Signature Date: _____

(Please attach a voided check)