DIVISION OF WATER TREATMENT
and
WASTEWATER TREATMENT
206 Claremont Avenue
Ashland, Ohio 44805
(419) 281-7041
(419) 289-9514 fax

MICHAEL A. HUNTER
Director

DIRECT PAYMENTS

I authorize the Ashland City Water Department to initiate withdrawals from my account at the financial institution named in this application for payment of my Ashland City Water monthly bills. This authorization will remain valid until either I, Ashland City Water Department, or my financial institution revoke it. These payments will be applied between the 10th of the month and the 15th of the month, but we will try to apply payments around the 12th of the month.

I can suspend payment of a monthly bill by notifying the Ashland City Water Department at any time prior to 4:00 p.m. three business days before the payment is scheduled to be deducted from my account. I understand that three suspensions in a 12 month period will result in cancellation of my participation in the Direct Payment program. I also understand that if I have an insufficient funds check, this may result in cancellation of my participation in the Direct Payment program immediately.

I understand that the Direct Payment program is an alternative method of payment only and does not otherwise affect my rights or the rights of the Ashland City Water Department or my financial institution with respect to each other. I further understand that the Ashland City Water Department and my financial institution reserve the right to terminate the Direct Payment plan and/or my participation in it. If I wish to discontinue my participation in the Direct Payment plan, I may do so by notifying the Ashland City Water Department.

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Authorized Account Holder Signature Date