



**CITY OF CLERMONT  
DIRECT DEBIT AUTHORIZATION FORM**

I hereby authorize the CITY OF CLERMONT to initiate direct debit entries from my Checking account for credit to my City of Clermont utility account. Direct Debit deductions occur on or about the **10<sup>th</sup>** of each month.

\*\*\*\*\***Please attach a voided check**\*\*\*\*\*

**Financial Institution Information:**

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

Financial Institution Address: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

**Utility Account Information:**

Customer Name: \_\_\_\_\_

Customer Account Number: \_\_\_\_\_

Customer Service Address: \_\_\_\_\_

This authorization will remain in effect until one of the following occurs:

- 1) The City receives a completed Direct Debit Cancellation Form.
- 2) The City has received two (2) non-sufficient fund notices from the bank in any twelve (12) month period. In this situation, the customer will be notified in writing by the City of the non-sufficient fund notices and be placed on a **cash only** basis when paying City utility bills.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date