



Town of Mineral

P.O. Box 316
312 Mineral Avenue
Mineral, Virginia 23117
Phone 540-894-5100

Utility Payment Authorization Agreement – Direct Payments (ACH Debits)

I (We) hereby authorize the Town of Mineral to initiate electronic debit entries to my (our) checking/savings account indicated below at the depository Financial Institution named below, and to debit the same to such account and, if necessary, initiate electronic credits to correct erroneous debits. I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law and NACHA rules and that funds must be available on the scheduled debit date. If funds are not available, I (we) acknowledge that the Town of Mineral may resubmit rejected transactions and that a late fee and/or returned payment fee will be charged. I (We) acknowledge that electronic debits for payment of utility bills will occur on the 15th day of each month. In cases where the 15th of the month falls on a Saturday, debits will occur on the Friday before the 15th. In cases where the 15th falls on a Sunday, debits will occur on the Monday following the 15th. In cases where the 15th falls on a holiday, debits will occur on the next business day following the 15th. **This agreement will remain in full force until The Town of Mineral has received a written notification from me (or either of us) of termination in such time and manner as to afford the Town of Mineral and Financial Institution three (3) days before my account is charged.**

BANK ACCOUNT INFORMATION

Name on Bank Account _____

Financial Institution _____

Address _____ City/State/Zip _____

Routing Number _____

Checking

Savings

Account Number _____

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UTILITY ACCOUNT INFORMATION

Name on Utility Account _____

Service Address _____ Account Number _____

Email Address _____ Phone Number _____

SIGNATURE

Print Name _____ Date _____

Signature _____

Received By _____ Date _____