** Read & initial disclaimers

**BOROUGH OF BRIELLE**
**601 UNION LANE, BRIELLE, NJ 08730**

## AUTHORIZATION FOR DIRECT PAYMENTS (ACH) DEBIT

Account to credit: ___ Water & Sewer ___ Taxes

I (we) authorize The Borough of Brielle to initiate debit entries to my (our) Checking Account/Savings Account indicated below at the depository financial institution named below, hereafter called Depository, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Property/ Service Address: _____

Water/Sewer Account Number: _____ Block & Lot: _____

Name(s):_____ _____
Please Print Please Print

Phone:_____ Email:_____

*This authorization is to remain in full force and effect until the Borough of Brielle has received written notification from me (or either of us) of its termination in such time and manner as to afford the Borough of Brielle and the Depository a reasonable opportunity to act on it. ___ Initial

The Borough of Brielle is not responsible for any overdraft or other charges imposed by the Depository listed above as a result of this service. I (we) acknowledge I (we) are responsible for all fees in connection with this transaction or cancellation thereof in connection with this agreement. ___ Initial

Name(s) on Account: _____ _____

Name of Bank: _____

City: _____ State: _____ Zip: _____

Routing/ ABA Number: _____Account Number: _____

Type of Account: Checking Savings Please circle one

Date:_____ Signature: _____

Date: _____ Signature: _____

- PLEASE RETURN WITH A VOIDED CHECK
- A BILLING STATEMENT WILL BE SENT FOR RECORD KEEPING PURPOSES

*NOTE: Written debit authorizations must provide that the receiver may revoke the authorization only by notifying the originator in the manner specified in this authorization.