

**ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM
VILLAGE OF MORTON - MORTON UTILITIES**

I, the undersigned, do hereby:

1. Request to participate in the Village of Morton's Electronic Funds Transfer Program for monthly payment of my Morton Utilities bill(s);
2. Authorize the Village of Morton to electronically transfer my utility bill payment from the checking or savings account indicated below;
3. Certify that I understand and agree that this authorization will remain in effect until I revoke or amend it either verbally or in writing;
4. Certify that I understand and agree that my utility bill payment will be deducted from the designated checking or savings account on the twenty-seventh (27th) day of each month (or the first business day after that date if the twenty-seventh (27th) day of the month is a Saturday, Sunday, or holiday observed by the Village) and that utility bill payments are considered paid on the due date shown on my utility bill; and
5. Certify that I understand and agree that if the designated checking or savings account has insufficient funds at the time of transfer, my utility bill will be considered unpaid and subject to disconnection and service fees.

Name (Print):

Utility Account Number:

Signature:

Name of Financial Institution:

Date:

Routing Number (9 digits):

Property Address:

Account Number:

_____ Checking

_____ Savings

Date Entered: _____

Entered by: _____

FOR OFFICE USE ONLY