7450 14 Mile Road Rockford, MI 49341 Phone (616) 866-0622



Matt McConnon, Supervisor Susan K. Hartman, Clerk Colleen L. Brown, Treasurer

FOR SEWER PAYMENTS ONLY E-Z PAY AUTHORIZATION AGREEMENT

I/We hereby authorize Courtland Township to initiate electronic debit entries to my/our bank or credit union checking or savings account set forth below, and to debit that same amount. I/We acknowledge that the origination of Automated Clearing house transactions to my/our account must comply with the provisions of the U.S. Law. I/We acknowledge that there may be fees and/or costs charged if there are insufficient funds in the account, and I/We will be personally liable for same and shall have an affirmative duty to reimburse Courtland Township for any fees or costs it incurs as a result of my/our account's insufficient funds. The authorization will remain in effect until Courtland Township has received written notification from me/us of my/our termination in such time and, in such manner, as to afford Courtland Township and said bank or credit union a reasonable opportunity to act upon it.

Name(s) as shown on	bill:		
Mailing Address:			
City/State/Zip:			
Email Address:			
Daytime Phone:		 -	
Sewer Account Num	ber:		
Signature:		Date:	_
Signature:		Date:	
Bank/Credit Union:	Name (s):		
	Branch Address:		<u>.</u>
	City:	, State:	-
	Account Number:		ē
	Routing Number:		e:
	Checking or Savings (C	Circle One)	