



City of Sebastopol

WATER & SEWER DIRECT DEBIT AUTHORIZATION

City of Sebastopol Water and Sewer customers may have their utility bill payment automatically deducted from their checking or savings account through the City's Direct Debit program. Here is how it works:

- **The City will mail the water and sewer service bill each billing period.** When the automatic direct debit is active, "AUTOPAY" will be printed on the payment coupon in the Amount Enclosed box of the bill which means you do not need to submit a payment.
- **The City will automatically debit your account on file on or about the 20th of the month for the entire balance due.**
- **If the direct debit is not honored by your bank,** (i.e., the account is closed or there are not enough funds in the account), you will be charged a service fee of \$25.00 by the City of Sebastopol. This amount will be added to your water and sewer account. It will be your responsibility to make your payment on the account, including the \$25.00 charge, before 5:00pm on final due date of the month to avoid a 5% penalty.
- **If you change bank accounts,** you must complete and submit a new Direct Debit Authorization form by the 14th of the month to ensure we process the payment to the correct bank.

Please sign, date, and attach a voided check to the lower portion of this authorization form. Forms without a voided check will not be accepted. Detach and submit to the Finance Department at City Hall or mail as shown below:

IN PERSON: City of Sebastopol
Administrative Services Department
7120 Bodega Ave
Sebastopol, CA 95472

BY MAIL: City of Sebastopol
Administrative Services Department
P.O. Box 1776
Sebastopol, CA 95473

If you want to submit this authorization via facsimile, please fax the form and your voided check to 707.823.1135. Please be sure to provide a phone number so we can contact you if any portion is not correct. We will not call you to confirm the form was received; however, you may call us at 707.823.7863 if you want to confirm receipt. **You can also email this form with a copy of a voided check to customerservice@cityofsebastopol.gov.**

KEEP THE TOP PORTION FOR YOUR RECORDS

Staple Voided Check Here

CUSTOMER TO COMPLETE – PRINT CLEARLY

Name: _____

Service Address: _____

Utility Billing Account Number: _____ Phone: _____

Routing Number: _____ Bank Account Number: _____

I hereby authorize the City of Sebastopol to charge my checking account for the City's water and sewer invoices on a bi-monthly basis. I understand that if the bank rejects my direct debit transaction due to insufficient funds or a closed account, I will be charged the City's returned check processing fee, currently \$25.00. This authorization shall remain in effect until written notice is received at the above address to cancel it.

Signature: _____ Date: _____