AUTOMATIC BILL PAYMIENT FORMI

| By completing this form you authorize DMU to withdraw payments from your checking or savings account. You will continue to receive your utility bill before the due date notifying you of the charges. Charges will be withdrawn from your checking/savings account on the 22nd of each month. | Sign up for this free service now to be effective for you next billing Customer Name: Service Address: City: ST: Information below must be completed for application to be accepted |
|--|--|
| You MUST attach a voided check for checking accounts or a deposit slip for saving accounts when applying. | Financial Institution Name: Type of Account: Savings Checking Checking/Saving Account Number: |
| If funds are not available at the time of payment, the plan will be cancelled. | Financial Institution Routing/Transit Number: Signature:Date: |
| Office Hours Monday – Thursday Eriday | 7:00a.m. – 4:30 p.m. |

Attached voided check or savings deposit slip below: