



**AUTHORIZATION FOR PREAUTHORIZED PAYMENTS**

I/We authorize the CITY OF SHEFFIELD to initiate debit entries to my/our account at the bank listed below, for the purpose of accomplishing the following preauthorized payments:

**WATER-SEWER UTILITY BILL PAYMENTS**

AMOUNT:

An amount which may vary.

\*I have the right to receive notice at least 10 days in advance of the due date of any payment of a varying amount.

Monthly – payment in full will be deducted from the bank on the 12<sup>th</sup> or the next banking day following the 12<sup>th</sup> of each month.

**BANK INFORMATION**

Bank Name: \_\_\_\_\_

Branch: \_\_\_\_\_

Bank Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Bank Phone Number: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Checking Account Number \_\_\_\_\_

\*Please include a void check or deposit slip

My/Our account will remain subject to its individual terms and conditions, which are not modified by this authorization. I/We understand that this authorization will remain in full force and effect until the termination date stated above or until the CITY OF SHEFFIELD has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the CITY OF SHEFFIELD and the UNITED BANK & TRUST a reasonable opportunity to act on it.

**CUSTOMER INFORMATION**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address (Service Location): \_\_\_\_\_ Sheffield, Iowa 50475

City Utility Bill Account Number: \_\_\_\_\_

Date Effective: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

City Use Only: Date Received \_\_\_\_\_ Received By \_\_\_\_\_

Mayor: Scott Sanders

Council: Brad Mulford, James Robbins, Nick Wilson, Dave Smit, Jill Peterson

110 South 3<sup>rd</sup> Street  
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