

**CITY OF ELKHART PUBLIC WORKS AND UTILITIES**  
**1201 S. Nappanee St., ELKHART IN 46516**  
**574-264-4273**

**PROVISIONS AND SERVICE AGREEMENT**  
**FOR CITY OF ELKHART PUBLIC WORKS AND UTILITIES**  
**AUTOMATIC DEBIT BILL PAYMENT SERVICE**

Payment Notice and Billing Questions

Your WATER and/or SEWER bill will be mailed/mailed to you as usual. From that day, you will have adequate time to plan for your automatic payment or contact us if there is any question about your bill.

Stop Payments

In addition to questioning any statement, you may also stop any automatic payment by notifying your financial institution at least three business days prior to the payment date. However, when you stop payment on a check, you are responsible for any charges this may involve. You should also advise us of any requested stop payment.

Record of Payment

The amount and date of your automatic payment will be shown on your regular bank statement. This is your proof of your payment. If there is a question about a payment, or if the amount differs from your bill, you must notify us and your financial institution within 60 days of the date of the statement on which the error is first reflected to initiate and investigation.

Paperless e-Bills

By electing to go paperless, you authorize the City to send your bills electronically to the email address provided below. Please notify us of any changes to ensure delivery of your bills.

Availability of Funds

You are responsible for having sufficient funds in the indicated account on the payment date. You will be charged should your payment be returned due to insufficient funds. Also, your automatic debit bill payment service may be cancelled if you miss a payment. Your automatic debit service will be cancelled if two payments are returned in a 12-month period.

Payment Date

We will notify you prior to your first automatic debit payment. Appropriate funds will be transferred from your account as you have designated on your application. If a payment is due on a weekend or holiday, your account will be debited on the next business day.

Termination

This authorization will remain in effect until we receive written notice from you 30 days prior to the cancellation date or until your service has been terminated.

Account Address Change

Please notify us of any account or address changes to ensure timely payments. You are responsible for submitting a new application when an account of address change occurs.

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**RETURN THIS APPLICATION WITH YOUR VOIDED CHECK**

I authorize the City of Elkhart Public Works and Utilities and the financial institution listed below to transfer (debit) money from the indicated checking account for payment of my city water and/or sewer bill. I will continue to pay my bill by check until I am notified that my automatic debit service has started.

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Customer Name (as it appears on your bill)

Your Public Works and Utilities Billing Account Number

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Service Address (Street/City/State/Zip Code)

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Mailing Address (if different)

Daytime Phone Number

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Financial Institution Name

Is this a Credit Union?

9-Digit ABA Code\*

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Address (Street/City/State/Zip Code)

Checking Account Number

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Email address

Paperless?

**I agree to the terms at the top of the application.**

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Authorized Signature

Date

\* Lower left corner of check or deposit slip