



Automatic Payment Authorization Form

Recurring Payment can Make Your Life Easier:

It's convenient: Saves you time and postage
Your payment is always on time, (even if you're out of town)
Eliminates late charges

Here's How Recurring Payments Works: You authorize regularly scheduled charges to your check account. You will be charged the amount indicated on your bill each billing period. The charge will appear on your bank statement as "ACH Debit". You acknowledge that other than your regular bill, no prior notification will be provided.

Please complete the information below:

Water Account Number

Telephone

Name on Account

Service Address

Email

El Segundo, CA 90245

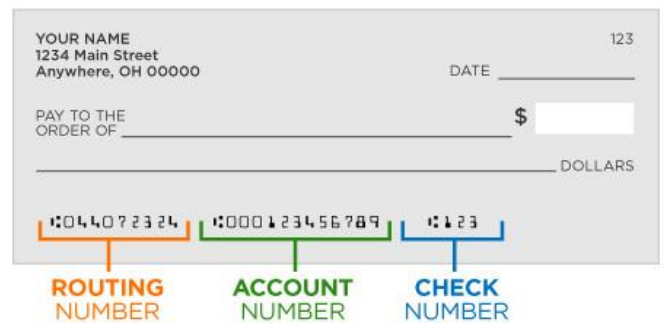
Account Type: CHECKING

Name on Account

Bank Name

Account Number

Bank Routing Number



******* PLEASE ATTACH A COPY OF A VOIDED CHECK *******

Name/Signature

Date

I understand that this authorization will remain in effect until I cancel it in writing. I agree to notify the City of El Segundo, in writing, of any changes to my account information, or the intent to terminate this authorization at least fifteen (15) days prior to the next billing date. If the noted periodic payment date falls on a weekend or holiday, I understand the payment may be executed on the next business day. I understand that because this is an electronic transaction, these funds may be withdrawn from my account immediately on the noted periodic payment date. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF), I understand the City of El Segundo may, at its discretion, attempt to process the charge again within thirty (30) days, and agree to an additional penalty charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my bank account must comply with the provisions of U.S. law. I agree not to dispute this recurring billing with bank so long as the transaction correspond to the terms indicated on this authorization form.

MAIL THIS FORM WITH A VOIDED CHECK TO:

City of El Segundo – Water Billing
350 Main St
El Segundo, CA 90245

OR

EMAIL TO:

h2oInquiries@elsegundo.org