



## Village of New Bremen Authorization for Automatic Payment

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I hereby authorize the **Village of New Bremen Utilities Office**, and the financial institution shown below to initiate entries to my checking or savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the Village of New Bremen and the Financial Institution a reasonable opportunity to act on it. Should the account be declared non-sufficient funds, a \$25 charge will be assessed.

**Please return form to: Village of New Bremen | Utilities Office | PO Box 27 | New Bremen, Ohio 45869**  
**Email – [office@newbremen.com](mailto:office@newbremen.com) | phone – 419-629-2447**

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Name of Financial Institution

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Address of Financial Institution

City

State

Zip

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Signature

Date

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Name – Please Print

Phone Number

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Address of Utility Service

Village of New Bremen Utility Account #

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Financial Institution Routing Number

Indicate whether we are to debit you checking account or savings account:

**(Please include a voided check or savings deposit slip with proper account numbers)**

\_\_\_\_ Checking Account

\_\_\_\_ Savings Account

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

Monthly payment will be debited on the due date – 10<sup>th</sup> of the month

When activated bill will state **Auto Debited on the Tenth of the Month.**

Check the box below to receive your utility bill via email. On the line please neatly print your email address.

Email Address (Please print legible) \_\_\_\_\_