



Sturgis Utilities Department
 1040 Harley-Davidson Way, Ste 103
 Sturgis, South Dakota 57785
 605.347.4425 * 605.347.4861 fax
 www.sturgis-sd.gov

AUTHORIZATION FOR AUTOMATIC BILL PAYMENT

Terms and Conditions of Auto-pay:

1. Withdrawals from your bank account will occur on or near the **10th** of every month, depending on weekends and holidays. The City shall be fully protected in honoring any such presented bills.
2. The City of Sturgis' authority to transfer funds from your account will not cease until the City of Sturgis receives written notice from you revoking this authorization agreement. This notice must be received by the City of Sturgis at least 30 days prior to the date on which you wish the arrangement to end.
3. If a withdrawal cannot be made, with or without cause on your part, the City of Sturgis shall be under no liability whatsoever even though such dishonor may result in the forfeiture of utility services. Any automatic withdrawal not honored by the bank will be charged a return item fee.
4. Do not assume auto-pay takes effect with next billing. Auto-pay is effective when the words **"Drafted-Do Not Pay"** are on the utility bill. Always check your account to verify.

Complete the authorization form below and return to the City of Sturgis.

PLEASE ATTACH A VOIDED UNSIGNED CHECK

Business/Customer Name:	Financial Institution Name:
Mailing Address:	Bank Address:
Phone Number:	Bank Routing Number:
Utility Service Address:	Bank Account Number:
Utility Account Number:	Checking [] OR Savings []

I hereby authorize the City of Sturgis to initiate variable entries to my banking account at the financial institution listed above for the purpose of making my monthly utility payment to the City of Sturgis Utilities Department.

I understand that I remain obligated to pay for utility services in the event that a withdrawal from my account is dishonored, for whatever reason, and the Sturgis Utilities Department shall retain its normal collection rights.

Signature:	Date:
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OFFICE USE ONLY Date Received _____ By _____ Date Entered _____

If changing or revoking automatic payment info:

Effective Date: _____

Updated 2/2016

*"In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, age, disability, religion, sex, familial status, sexual orientation and reprisal."
 (Not all prohibited bases apply to all programs.)*