

## **ACH Autopay**

The **ACH Autopay** program makes paying your utility bill easy, convenient and saves you time and money by:

- Eliminating the need to write a check each month
- Saving postage costs
- Avoiding the need to make a special trip to the post office or the city office to pay your utility bill
- Be sure your payments are made on time, no more delinquent fees

### **Enrollment**

Enrollment is simple. To enroll for Autopay, print and complete the ACH Autopay Authorization Agreement below, sign it and return to Salem City with a voided check or Direct Deposit Authorization form from your bank.

### **Process**

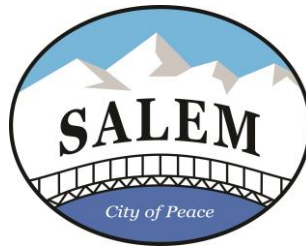
- The **Autopay** service is provided as a convenience for you - your participation is voluntary and can be terminated upon your request. Just print and fill out the Autopay Authorization Termination form. Mail or drop off the completed form to Salem City and give us a reasonable opportunity to act on it.
- Funds will be withdrawn from the account on the 15<sup>th</sup> of each month or the following business day if the 15<sup>th</sup> is on a weekend or holiday.

### **Terms and Conditions**

- If a customer changes bank or bank accounts and wants to continue using the **Autopay** program, the customer must sign a new authorization agreement.
- Salem City may terminate the authorization due to Non-Sufficient Funds (NSF) in the account and may add any fees associated with a NSF to the Customers utility account.

### **Authorization Agreement**

Please print out the Authorization Agreement form below and fill it out appropriately. Then mail or drop off the completed to the city office. If you have any questions regarding the **Autopay** service, call 801-423-2770 or visit the City Office.



### ACH AUTOPAY AUTHORIZATION AGREEMENT

I(We) hereby authorize and request Salem City to initiate withdrawal entries and to initiate, if necessary, deposit entries and adjustments for any withdrawal entries in error to my (our) account indicated below and the financial institution named below, hereinafter called FINANCIAL INSTITUTION, to deposit to or withdraw from such account.

This authority is to remain in full force and effect until Salem City and FINANCIAL INSTITUTION receive written notification from me (or either of us) of its termination in such time and in such manner as to afford Salem City and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

Funds will be withdrawn from the account on the 15<sup>th</sup> of each month or the following business day if the 15<sup>th</sup> is on a weekend or holiday. Salem City may terminate the authorization due to Non Sufficient Funds (NSF) in the account and may charge any fees associated with a returned payment.

**Salem City Utility Account Number:** \_\_\_\_\_

**Customer Name:** \_\_\_\_\_

**Circle Type of Account:**      Checking      Savings

**Financial Institution's 9 Digit Routing Number:** \_ \_ \_ \_ \_

**Customer's Checking/Saving Account #:** \_ \_ \_ \_ \_

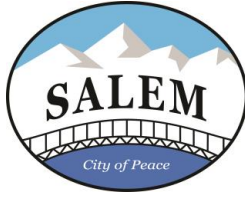
**Customer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Customer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**IMPORTANT NOTE:** To ensure proper bank coding of your Autopay, attach a voided check or a Direct Deposit Authorization form from your bank.

**Attach Voided Check Here**

**DO NOT SIGN UP FOR XPRESS BILL PAY AUTOPAY OR YOU WILL  
MAKE DUPLICATE PAYMENTS ON YOUR ACCOUNT**



**Salem City  
Autopay Authorization Termination Form**

I (We) hereby give written notification to terminate my (our) Autopay with Salem City for the utility account number listed below.

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

Salem City Utility Account Number: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Customer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Customer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_