



DIRECT DEBIT APPLICATION

How does Direct Debit work?

Direct Debit lets you authorize the payment of your utility bill directly from a checking account or credit card. In other words, your check writing days are over! Direct Debit means you won't have to worry about late payment fees or bother with envelopes, stamps and mailboxes again!

How will I know how much is being deducted?

You'll still receive a copy of your bill. If you have questions about specific charges, simply contact The City of Horseshoe Bay. Otherwise, your bill will be paid automatically.

When will my bill be paid?

For both the "Checking Account Debit" and the "Credit or Debit Card" option, payment automatically takes place every 15th day of each month after you receive your bill.

Please complete the "Direct Debit Application" section and then sign the "Authorization Agreement". Next, complete EITHER the "Credit Card Debit" OR "Checking Account Debit" section. If you choose the "Checking Account Debit" option, include a voided check and mail back to The City of Horseshoe Bay.

Please continue to pay your bill as usual until a message appears on your bill stating that the bill will be paid by Direct Debit.

I Would Like to Pay By (check one)

Credit Card

Checking Account

DIRECT DEBIT APPLICATION (This Section to be completed on ALL Applications) Last 4:

Name (as shown on bill) Last _____ First _____

Account Number _____ Physical Address _____

Billing Address _____

City _____ State _____ Zip _____

Authorization Agreement

I hereby authorize The City of Horseshoe Bay and the financial institution designated in this application to charge the account/credit card I have specified for payment of my monthly service. I understand that a \$35.00 fee will be charged to my account for each request returned for non-sufficient funds. If two requests are returned for non-sufficient funds, I will be excluded from the plan. In addition, I understand that both the financial institution and The City of Horseshoe Bay reserve the right to terminate this payment plan and/or my participation therein. At any time, I may elect to discontinue my enrollment in this plan. If I so choose, I will provide written notice, upon receipt of my bill, to The City of Horseshoe Bay.

Signature _____

Date _____

Phone _____

PLEASE SELECT ONE OF THE FOLLOWING OPTIONS:

Credit and Debit Card charges a 3.5% Convenience Fee

Card Type: VISA MasterCard CCV # _____

Account # _____ Exp Date _____

Name (as it appears on your card) _____

Billing Address _____

City _____ State _____ Zip _____

Checking Account Debit

Financial Institution _____

Address _____

City _____ State _____ Zip _____

Account Name (as it appears on your checks) _____

Routing Number * _____

Account Number * _____

Include a voided check from your account. Make certain your check is marked VOID

****To avoid a late notice/charge, it is your responsibility to inform The City of Horseshoe Bay of a change in exp. date or account #.***