



Marion County Utilities Electronic Fund Transfer Authorization

Return this form to:
11800 SE US Hwy 441
Bellevue, FL 34420-4558

I, _____, authorize Marion County Utilities to access my checking account and withdraw funds to pay my monthly water and/or sewer bills. I understand that if I want to cancel this automatic payment system, I must notify Marion County Utilities in writing and give at least 10 days advance notice.

ELECTRONIC FUND TRANSFER APPLICATIONS CAN TAKE UP TO TWO BILLING CYCLES TO PROCESS.

Please check one

NEW PARTICIPANT

CHANGE AN EXISTING ACCOUNT

Utility Account Number: _____ Telephone Number: _____

Name on Utility Account: _____

Name as it appears on your Bank Account: _____

Name of Financial Institution: _____

Branch: _____ Telephone Number: _____

Address of Financial Institution: _____

BE SURE TO ENCLOSE A BLANK VOIDED CHECK, SO THAT WE CAN OBTAIN THE NECESSARY ROUTING AND ACCOUNT NUMBERS.

Signature of Utility Account Holder

Date

Please sign your name(s) exactly as you do on your checks

Signature of Checking Account Holder

Date

CANCEL EFT BANKING

Utility Account Number: _____

Name on Utility Account: _____

Date You Want EFT Stopped: _____

Please sign your name(s) exactly as you do on your checks

Signature

Date