

Anoka City Hall 2015 1st Ave, Anoka, Minnesota 55303-2270 Phone: 763-576-2750 Fax: 763-576-2777 TTY: 763-422-0422

## **Attention Anoka Utility Commercial Customers:**

Let the City of Anoka process your next utility bill payment automatically on the due date. With our AUTO PAY PLAN you can have your utility payment automatically withdrawn from your checking or savings account on the due date each month. You will still receive your City of Anoka bill stating "DO NOT PAY – BANK PAYMENT\*" next to the payment amount, so that you know how much will be deducted. \*Until you see this message, make your payments as usual. To start paying your utility bills through the AUTO PAY PLAN, simply complete this form, attach a voided check or savings withdrawal slip, and return all to us with your current City of Anoka utility payment.

## **Enjoy these benefits:**

- SMALLER START-UP DEPOSIT
- SAVE MONEY (no stamps)
- SAVE TIME (no checks to write)

(Must have authorized access to Utility Account)

NO LATE FEES, No worries!!!

AUTO PAY PLAN is a **free** City of Anoka service and you can withdraw at any time by contacting us in writing feel free to contact one of our utility representatives if you have any questions at 763-576-2750. Sign up now and start seeing the benefit!

| <i>f</i>   | AUTO PAY PLAN FORM   |  |   |
|--|--|--|---|
| Business Name on Account:  |  |  |   |
| Customer Name on Account:  |  |  |   |
| Service Address:   |  |  |   |
| Utility Account Number:  |  |  |   |
| Daytime Phone:   |  |  |   |
| Financial Institution (or Bank Name):  |  |  |   |
| Bank Account Number:   | Select One:  | Checking   | ☐ Savings                                   |
| Financial Routing Number:  |  |  |   |
| By signing below I am authorizing the City of Anokochecking/savings account. I understand that if I am understand that returned payments may affect my a temporary removal and addition to the auto pay prequires a 10 day notice. | removed from Auto Pay within ability to remain on the auto pay | 12 months I will be bi $\gamma$ plan. I understand the | lled a deposit. I<br>nat I may only request |
| Utility Account Holder   |  | Foday's Date   |   |
| Bank Account Holder  |  | Date Signed  |   |

DROP OFF OR MAIL COMPLETED FORM TO: ANOKA CITY HALL, 2015  $1^{\rm ST}$  AVE, ANOKA, MN 55303.

Attach voided check or savings withdrawal slip here