



City of Lakewood

ACH Direct Payment Enrollment Form

Instructions:

Complete the enclosed Authorized Agreement for Direct Debit Payment

Checking Account Withdrawal:

Include a voided check (a deposit slip cannot be used)

Savings Account Withdrawal

Include a deposit slip for the account

Authorized Agreement for Direct Debit Payments

I hereby authorize and request the City of Lakewood to debit my (our) checking or savings account at the banking institution listed below for payment of water and/or sewer charges. I hereby authorize and request the banking institution to accept debit entries initiated by the City and to debit the same to my account without liability for the correctness of the entries. I understand that my account will be debited each billing cycle, thirty (30) days from when my water and/or sewer account is billed, which is the due date. If the due date is on the weekend or holiday, the payment will be deducted on the next business day.

It is understood and agreed that I may withdraw from participation at any time by notifying the Water/Sewer Division in writing by the 10th day of month after I am billed. If I withdraw after the 10th day of the month, my participation will not be terminated until the next billing cycle.

**** A service charge of \$18.00 will be placed on your account for each returned transaction.***

City of Lakewood Water/Sewer Account Number: _____

Customer Name: _____

Service Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email (optional): _____

Billing Address (if different than service address): _____

City: _____ State: _____ Zip Code : _____

Please check the type of account that you will use: Checking Savings

Banking Institution: _____

City: _____ State: _____

Bank Telephone #: _____

Bank Routing #: _____

Bank Account #: _____

Customer Signature: _____ Date: _____

Mail the agreement and the voided check or savings deposit slip to:
City of Lakewood
P.O. Box 261455
Lakewood, CO 80226-9455