

# CITY OF CIBOLO

## AUTOMATIC PAYMENT PLAN AUTHORIZATION AGREEMENT

I authorize the City of Cibolo to begin drafting funds each month, **between the 12<sup>th</sup> and the 14<sup>th</sup> of each month** from my account with the financial institution named below in the amount of the monthly utility bill. I understand that I will continue to receive a monthly Cibolo utility bill for review only.

I also understand that I may discontinue participating in the Automatic Payment Plan (APP) at any time by sending a written request to the City of Cibolo. In addition, it is my understanding that both the City of Cibolo and my financial institution have the right to terminate this payment plan or my participation therein.

In the event of there are not funds available at the time of draft, I understand that I will be charged a NSF fee.. Then I will have to bring the payment into the City of Cibolo in cash along with the NSF charge, currently \$25.00. After two such incidents of NSF, I will be terminated from the APP and will be placed on a CASH ONLY basis.

Name \_\_\_\_\_  
(as listed on the utility bill with Cibolo)

Service Address \_\_\_\_\_

Utility Bill Account # \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Work Phone Number \_\_\_\_\_

Financial Institution's Name \_\_\_\_\_

Account Number \_\_\_\_\_

Name(s) appearing on Account \_\_\_\_\_

Type of Account    ( ) Savings    ( ) Checking

Signature \_\_\_\_\_ Date \_\_\_\_\_

By signing, You agree to the above terms

ATTACH VOIDED CHECK HERE  
(Mandatory)