



City of Brisbane
50 Park Place
Brisbane, CA 94005-1310

Automatic Bill Payment Agreement

- Please complete & sign this form
(The name on the checking account must be the same name that is on the water account.)
- Attach a voided Check
- Return form to the Finance Department

CHECKING ACCOUNT INFORMATION:

ATTACH VOIDED CHECK HERE.

I HEREBY AUTHORIZE MY UTILITY SERVICE PROVIDER, CITY OF BRISBANE, TO INITIATE DEBITS (OR CORRECTING ENTRIES TO PREVIOUS DEBITS) FROM MY CHECKING ACCOUNT. I UNDERSTAND THAT MY ACCOUNT WILL BE DEBITED BETWEEN THE 20TH AND 25TH OF THE MONTH AFTER I RECEIVE MY UTILITY BILL.

FINANCIAL INSTITUTION:

ITS CITY & STATE LOCATION

THIS AUTHORITY IS TO REMAIN IN FORCE UNTIL I REVOKE IT BY GIVING WRITTEN NOTICE TO THE CITY OF BRISBANE OR UPON TERMINATION OF MY WATER ACCOUNT.

SIGNATURE

DATE

PRINT NAME

WATER ACCOUNT INFORMATION:

Name on Water Account

Service Address

Water/Sewer Account #

Daytime Phone Number