City of Clare

AUTOMATIC BILL PAYMENT ENROLLMENT

202 W. Fifth St., Clare, MI 48617

WWW.CITYOFCLARE.GOV

Please place a check mark in front of those bills you wish to have set up with ACH

_____ CITY UTILITY BILLS (WATER, SEWER, AND/OR GARBAGE)

_____ CITY TAXES TAX ID #: _____ - _____ - _____ - _____ - _____

YOUR TAX AND UTILITY ACCOUNT NUMBER IS AVAILABLE ONLINE AT WWW.CITYOFCLARE.ORG OR COPY LINK https://bsaonline.com/?uid=204

PERSONAL INFORMATION:

SERVICE ADDRESS:

PROPERTY OWNER'S NAME:

NAME AS SHOWN ON UTILITY/TAX BILL:

MAILING ADDRESS:

CITY/STATE/ZIP:

TELEPHONE: ( ) **This phone is: Home Work Cell Message**

EMAIL ADDRESS:

FINANCIAL INFORMATION:

NAME OF FINANCIAL INSTITUTION:

ABA/ROUTING NUMBER:

BANK ACCOUNT NUMBER:

DATE TO DEDUCT FIRST PAYMENT: **Account Type: Checking Savings**

MISCELLANEOUS INFORMATION (Please initial by each item that you have read said item):

1. I understand all information provided here shall remain confidential.
2. I authorize the City of Clare to deduct my payments directly from my account as listed above.
3. I agree that if/when I no longer wish to participate in this program, I will notify the city in writing.
4. I understand that if at any time my automatic payment does not go through due to lack of funds in the account, I will be charged the $25.00 Non-Sufficient Fund fee by the City of Clare, and I will automatically be removed from the Automatic Bill Payment Program.

Customer's Signature _____ *Date:* _____

For TAX ENROLLMENT please mail form to: CITY TREASURER, 202 W. FIFTH ST., CLARE MI 48617
Contact information: Shannon Sirpilla, (989) 424-4069 or email ssirpilla@cityofclare.gov

For UTILITY ENROLLMENT please mail form to: UTILITY CLERK, 202 W. FIFTH ST., CLARE, MI 48617
Contact information: Mary Warner, (989) 424-4071 or email mwarner@cityofclare.gov