

TREASURER'S OFFICE SUMMER AND WINTER PROPERTY TAXES

Recurring Automatic Bill Payment Enrollment Form

#1 COMPLETE THE INFORMATION BELOW:
Taxpayer Name:
Property Street Address:
Parcel Number: 03-57 Daytime Phone:
Email Address:
#2 PROVIDE THE REQUIRED FINANCIAL INFORMATION BELOW:
Name of Financial Institution:
Routing Number: Account Number:
☐ Checking Account ☐ Savings Account
If you would like to set up RECURRING payments for your tax bill, please initial here:
A COPY OF A VOIDED CHECK IS REQUIRED to ensure the correct account and ABA/routing numbers are used for this electronic payment. For savings account deductions, the City REQUIRES A COPY OF YOUR MEMBERSHIP CARD.
#3 PROVIDE YOUR SIGNATURE FOR AUTHORIZATION
I HEREBY AUTHORIZE THE CITY OF SAUGATUCK to deduct the full amount of my summer and winter property tax bills from the checking or savings account listed above on the following recurring dates (bank processing):
Summer Taxes: ☐ Due Date (example: Sept. 14, 2018)
Winter Taxes: ☐ Year End (example: Dec. 31, 2018) OR ☐ Due Date (example: Feb. 14, 2018)
I understand that all information provided will remain confidential. I understand that it is my responsibility to confirm the City has received and processed my enrollment form. I understand that a fee will be charged if my payment is returned for any reason and that my taxes will be considered unpaid and subject to penalty if not paid by summer and winter due dates. If at any time I decide to discontinue this payment service, I will notify the City of Saugatuck in writing no less than 14 days prior to the scheduled payment date.
THIS FORM CANNOT BE PROCESSED WITHOUT YOUR SIGNATURE
Signature:Date:

#4 MAKE A COPY OF THIS FORM FOR YOUR RECORDS AND RETURN ORIGINAL TO CITY HALL

City of Saugatuck PO Box 86 Saugatuck, MI 49453 peter@saugatuckcity.com Hours: M-F 8:30-5 pm Drop Box: 24-7 Phone: 269-857-2603 Fax: 269-857-4406

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