

The City of Tiffin would like to offer a convenient option for paying your sewer bill. You will still receive your bill by mail indicating the payment will be deducted from your account on the due date.

SEWER REVENUE
DEPARTMENT
PO BOX 156
TIFFIN, OH 44883-0156
Phone: 419-448-5429
Fax: 419-448-5406



AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS

Name _____

Service Address _____

Phone# _____

Sewer Revenue Account # ____ * ____ * ____

BANK INFORMATION

Bank Name _____

Bank # ____ (must be 9 digits)

Account # _____

(This must be checking account #.)

Please attach a voided check.

Payee (to whom check is being paid) → Company Name

Account Name and Address → [Company Name, Year, Name, Phone Number, Address, City, State, Zip]

Current Date → _____

Check Number → 2323

Bank Transit Routing Symbol → 06-1000 BRANCH 921

Written Amount (entire line filled to prevent alteration) → Pay To The Order Of: _____

Dollar Amount (Written close to dollar sign to prevent alteration) → \$ 19 Dollars

Bank Name → Peach Bank of Georgia, N.A., Atlanta, GA 30302

For your convenience in recording reason for writing check → Bank No. 0610000232, Account No. 012 233 222, Check No. 2323

Checkwriter's Signature → _____

I authorize The City of Tiffin to initiate debit entries to my bank account indicated above. This authority is to remain in effect until The City of Tiffin has received written notification from me of its termination with a reasonable amount of time to act on it.

Signature _____ Date _____