



### ACH Recurring Payment Authorization

Dear Commercial Customer:

Thank you for your interest in our automatic debit program for your DeKalb County Water/ Sewer or Commercial Sanitation service. To initiate this program, the information below is required. A voided check encoded with both your bank's routing and account numbers, or a bank letter (on bank letterhead) certifying the bank account name and account number must be provided in order to process the application. If the name on the utility account is not the same as the person signing the application, please have the utility account owner submit a signed letter giving authorization.

There are three options for returning the authorization form: email to [dekalbwatertbillingfn@dekalbcountyga.gov](mailto:dekalbwatertbillingfn@dekalbcountyga.gov) (attach a scanned copy of a voided check); fax to (404) 371-2679; or mail to **Utility Customer Operations, ATT: Billing – ACH, 774 Jordan Lane, Suite 200, Decatur, GA 30033**. Please include a voided check with encoded account numbers in the return envelope provided.

Any outstanding balance will not be drafted until the next billing cycle; customers with an outstanding balance will need to use another method of payment until you receive a bill indicating that an automatic debit payment has been scheduled.

You will continue to receive your regular bills. Once automatic debit is active, your bill will have a message on it indicating that you are scheduled for automatic debit on the due date printed on that bill. If there is no message on the bill, you should pay the bill as you have in the past. A fee of \$30.00 will be charged for any debit that is returned, unpaid, by your bank. Service will be subject to disconnection, without further notice, if not paid promptly. For any questions about your bill, please call (404) 387-4475 prior to the due date.

#### **Application for businesses, garden clubs, homeowners associations or similar type accounts**

If a business check is submitted with the application, and the name of the person signing the application is not printed on the check, please include a letter (on bank letterhead) stating that this person is an authorized signer on the bank account. For the security identification portion of the application, please provide the tax identification number (TIN).

Automatic pre-authorized debit withdrawal for DeKalb Water/Sewer or Commercial Sanitation billing

New enrollment       Change in financial institution

Customer number \_\_\_\_\_ Name \_\_\_\_\_

Daytime phone number \_\_\_\_\_ Email \_\_\_\_\_

Service address \_\_\_\_\_ Bank or financial institution \_\_\_\_\_

Bank account number \_\_\_\_\_ Routing number \_\_\_\_\_

Name assigned to bank account number \_\_\_\_\_

Security identification (mother's maiden name, TIN, or last four digits of SSN#) \_\_\_\_\_

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

I authorize the DeKalb County Department of Finance and the bank or financial institution indicated above to automatically debit the account referenced above for payment of sanitation service indicated amount. I agree that in no event will DeKalb County or the financial institution be liable for indirect or consequential monetary damage resulting from authorized automatic debit transactions. The authority agreement will remain in effect until I cancel in writing, and I agree to notify DeKalb County, in writing, of any changes in my account information or termination of this recurring payment authorization option.

For questions or concerns, please contact DeKalb County Utility Customer Operations at (404) 378-4475.