

DIRECT PAYMENT ENROLLMENT FORM

City of Ripley

Utilities

(304) 372-3482

NAME

ADDRESS

DAYTIME PHONE NUMBER

NAME OF BANK _____

FINANCIAL INSTITUTION ROUTING NUMBER _____

BANK ACCOUNT NUMBER _____ CHECKING ___ SAVINGS ___

I authorize the City of Ripley to initiate electronic entries to my checking/savings account listed above and have agreed to the terms listed on the authorization. I may revoke my authorization with the City of Ripley at any time by providing written notice to the following:

City of Ripley
203 Church St. South
Ripley, WV 25271
304-372-3482

Date of Payment **One day before the due date**

Signature

Utility Account Number _____

****Upon receipt of this form, the automated withdraw process will begin on your next billing cycle****