



The Village of Anna

209 West Main St. PO Box 140
Anna OH 45302
Telephone (937) 394-3751
FAX (937) 394-4704

Utility Bill Authorization ACH Debit – Automatic Payment & Email Billing Form

****PLEASE PRINT CLEARLY****

Name: _____ Utility Account Number: _____

Address: _____ Phone#: _____

Email address: _____

By filling out this form:

- I authorize the Village of Anna to make electronic entries to my account below. Should the account be declared non-sufficient funds, a \$25 charge will be assessed.
- I understand that I receive my Village of Anna utility bill by email and will no longer receive a hard copy.
- It is my responsibility to provide a current email address and notify the village of any changes.
- This arrangement shall remain in effect until written notice from either myself or the Village of Anna named above cancels this process and the service has been paid in full.

Bank Name: _____

Bank ABA Number: _____

Checking Account Number: _____ or

Savings Account Number: _____

Signature: _____ Date: _____

**** Attach copy of voided check here.**