

Debit Origination Authorization Form

Financial Institution: Union Bank

Company: Village of Hyde Park, Inc.

I authorize the Village of Hyde Park, Inc. to initiate a withdrawal from my account one time per year at the financial institution named in this application for payment of my Village of Hyde Park property taxes. This authorization will remain valid until I, the Village of Hyde Park, or my financial institution revokes it.

All tax bills will be mailed prior to August 1st each year indicating the amount due. **The full amount due will be deducted on the tax due date of August 30th.** An automatic payment can be suspended by notifying the Village of Hyde Park, at any time prior to 4:00P.M. three business days before the payment is scheduled to be deducted from your account.

I understand that the Direct Payment program is an alternative method of payment only and does not otherwise affect my rights or the rights of the Village of Hyde Park or my financial institution with respect to each other. I further understand that the Village of Hyde Park and my financial institution reserve the right to terminate the Direct Payment plan and /or my participation in it. If I wish to discontinue my participation in the Direct Payment plan, I may do so by notifying the Village of Hyde Park.

I understand that there is a \$ 15.00 charge for a returned transaction including but not limited to insufficient funds, non-existing account, closed account, etc.

Authorization Account Holder Signature **Date**

Parcel ID# **Date**

Please retain a copy of this authorization form for your records.

Attach voided check:

Name of Financial Institution: _____

Phone Number: _____

Address of Financial Institution: _____

City: _____ **State:** _____ **Zip Code:** _____

Routing #: _____ **Account #:** _____

Please check appropriate box:

- Checking**
- Savings**