

## **Collier County Utility Billing**

## **AUTOMATIC BANK PAYMENT** Authorization Form (US Banks only) Please print clearly when completing this authorization form.

	Utility Account No.	
Name on Utility Account		
Name of Tenant (where applicable)		
Service Address		
City, State, Zip + Four		
Naples Phone No.	Alternate Phone No	
Email Address		
***************************************	***************************************	*******
Financial Institution (US Banks only)		
Name of account holder(s)		
(Name(	s) as they appear on your check from the abov	ve US Bank)
Transit/Routing No.	Account No	
authorize Collier County Utility Billing to, if neces	mount of my monthly bill to Collier County sary, credit entries and adjustments from any	
authorize Collier County Utility Billing to, if neces (our) account. This authorization is to remain in termination. My (our) notification must afford the Utility Billing and the financial institution may term	sary, credit entries and adjustments from any n effect until I (we) notify Collier County Util financial institution a reasonable opportunity	debit entries in error to my lity Billing in writing of its to act on it. Collier County
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