



**AUTOMATIC BANK PAYMENT  
Authorization Form (US Banks only)**

Please print clearly when completing this authorization form.

Utility Account Nos.				

Name on Utility Account \_\_\_\_\_

Name of Management Company \_\_\_\_\_

Service Address \_\_\_\_\_

City, State, Zip + Four \_\_\_\_\_

Naples Phone No: \_\_\_\_\_ Alternate Phone No: \_\_\_\_\_

Email Address: \_\_\_\_\_

\*\*\*\*\*

Financial Institution: \_\_\_\_\_

(Name(s) as they appear on your check from the above US Bank)

Name of account holder(s): \_\_\_\_\_

Transit Routing No: \_\_\_\_\_

Account No: \_\_\_\_\_

I (we) hereby authorize Collier County Utility Billing to initiate debits to the financial institution account listed above. I (we) authorize the financial institution to debit the amount of the monthly bills for the above account numbers to Collier County Utility Billing. I (we) also authorize Collier County Utility Billing to, if necessary, credit entries and adjustments from any debit entries in error to the account. This authorization is to remain in effect until I (we) notify Collier County Utility Billing in writing of its termination. My (our) notification must afford the financial institution a reasonable opportunity to act on it. Collier County Utility Billing and the financial institution may terminate this agreement within ten days written notice.

Signature of account holder 1 \_\_\_\_\_ Date \_\_\_\_\_

Signature of account holder 2 \_\_\_\_\_ Date \_\_\_\_\_

*(Signatures are required from both account holders if bank account is in joint names)*

Collier County Utility Billing will print a message on the bill to confirm your enrollment. It takes four to six weeks to complete your enrollment so please continue to pay your bill as normal until you receive the message on your bill confirming enrollment.

Please attach a **voided check** (Bank Deposit Slips or Starter Checks are not accepted) from your Checking Account and return to:

**Collier County Utility Billing, 4420 Mercantile Avenue, Naples, FL 34104**