

## **City of Hollister**

327 Fifth St, Hollister, CA 95023

E-mail: hollisterbilling@hollister.ca.gov

Phone: (831) 636-4301

## **Automatic Payment Authorization**

When you enroll in Auto Pay, each month the City will automatically debit your personal checking for the total amount of your City of Hollister utility bill (sewer, water, and street sweeping). You will continue to receive your monthly City of Hollister utility bill as you do currently; however, no manual payment will need to be made as the full amount due will be electronically deducted from your account automatically on the 20<sup>th</sup> of every month.

## Terms and Conditions to Participate in Automatic Payment (Auto Pay)

To participate in Auto-Pay, you must agree to and understand all of the following terms and conditions:

- Your utility account must be current to be eligible to sign up and remain on this program.
- It may take 3-6 weeks for the Auto Pay enrollment to be processed. You will need to continue to pay your utility bill manually until you see \*\*\*\* PAID BY DRAFT\*\*\* appearing on your bill.
- You must authorize the City of Hollister to debit your checking account for the total monthly charges for utility services; partial
  payments will not be allowed.
- You must ensure that sufficient funds are in your checking account to cover the full amount of your utility bill.
- If three electronic fund transfers are refused by your bank account within a 24-month period, the City of Hollister will cancel this agreement.
- The City of Hollister must be promptly notified of any change to your checking account. It is your responsibility to provide the City of Hollister with current bank account information.
- The City of Hollister recognizes the need for the privacy and protection of personal information. The City of Hollister does not release customer's personal information to outside agencies or companies, except as needed in the billing and collection process related to the City of Hollister's utility services.

## AUTHORIZATION

I have read, understand and agree to the above Terms and Conditions. I hereby authorize City of Hollister to initiate debits (payments) or credits

Financial Institution	Type of Acc	ount: Checking	
r manetar institution			
*Routing/ABA Number		Bank Account Number	
	the number located at t		
MPORTANT: Please attach a <u>voided check to thi</u> account print out. *The Routing/ABA Number is to the recount print out.  Name on Bank Account (please print).  Customer Signature	the number located at t	ne lower left corner of your check (usua	
Name on Bank Account (please print).	the number located at t	Hollister Account No.	