

Direct Pay

The Ea\$y Way To Pay Your Utility Bill

Direct Pay is a no-fuss way to pay your residential or business City Utility bill.

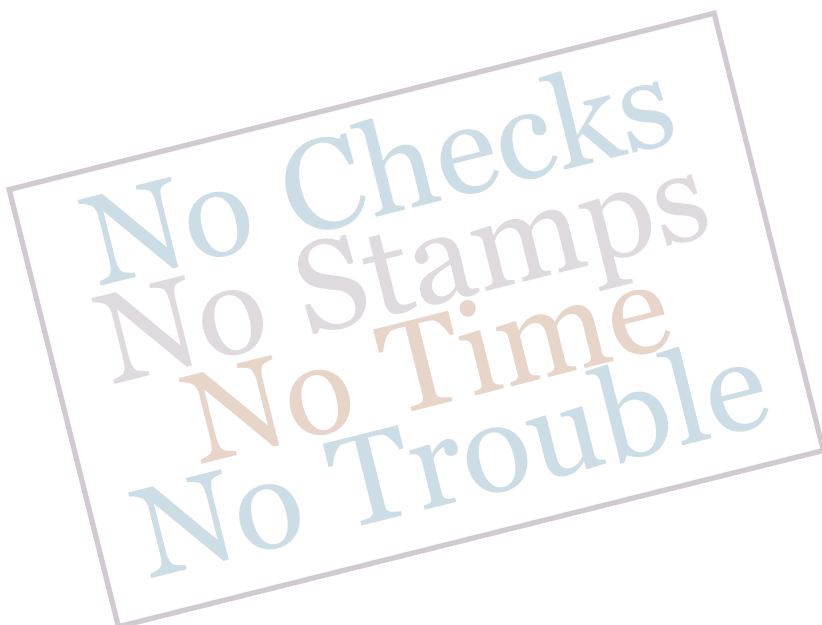
How it works

- Using Direct Pay, you authorize your financial institution to pay the amount of your monthly utility bill directly from your checking or savings account.
- Your bill amount will be deducted on the 15th of the month.
- Each month, you will receive a statement showing the amount and cost of your utilities.

How to sign up for Direct Pay

Simply fill out and return the direct pay form. Please note that it may take up to 2 billing cycles for the City to obtain authorization from your financial institution to begin direct pay.

Once your enrollment is processed, you will see the message "DIRECT PAYMENT. This bill is for information only." This message lets you know that you are now an active participant on the Direct Pay program and that you will not need to send a payment for the amount due.



Direct Pay Authorization Form

This authority is to remain in full force until the City of St. Charles and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the City of St. Charles and DEPOSITORY a reasonable opportunity to act on it. I (or either of us) has the right to stop payment of a debit entry by notification to DEPOSITORY at such time as to afford DEPOSITORY a reasonable opportunity to act on it prior to charging account. After account has been charged, I have the right to have the amount of an erroneous debit immediately credited to my account by DEPOSITORY, provided I (we) send written notice of such debit entry in error to DEPOSITORY within 15 days following the issuance of the account statement or 46 days after posting, whichever occurs first.

Upon completion of this form, please print and send it along with a voided check to: City of St. Charles - 830 Whitewater Avenue, St. Charles, MN 55972

Customer Name

Utility Account Number

Name of Financial Institution

Financial Institution Address

Financial Institution ABA#:
(9 digit number on bottom left of check)

Financial Institution Account Number

Signature(s)

Date

**PLEASE STAPLE VOIDED
CHECK TO THE FORM**