

City of Minden

P.O. Box 239, 325 N. Colorado
Minden, Nebraska 68959

phone 308.832.1820
fax 308.832.1949
www.MindenNebraska.org



Utility Bill Automatic Withdrawal Authorization

Customer Information	
Name	_____
Address	_____
Phone	_____
Utility Accts	_____
Bank Information	
Bank Name	_____
Account Type (please mark)	
<input type="checkbox"/> Checking	<input type="checkbox"/> Savings

My signature below acknowledges that I understand the following:

- Payments are automatically withdrawn from my bank account on the **NINTH BUSINESS DAY OF THE MONTH**. If the 9th falls on a weekend or bank holiday, then payment will be withdrawn on the next business day.
- Automatic withdrawals that are returned for in-sufficient funds will be charged a \$35.00 return fee and must be paid with cash or a money order. Two in-sufficient returns will terminate the automatic withdrawal payment from the above stated utility account(s) for a period of one year.
- I hereby authorize the City of Minden, hereinafter called Company, to initiate credit/debit entries and to initiate, if necessary debit/credit entries and adjustments for any credit/debit entry in error to my (our) bank account indicated above and the financial institution named above, hereinafter called depository, to credit and/or debit the same to such account. This authority is to remain in full force and effect until Company has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Company and Depository a reasonable opportunity to act on it.

Signature

Effective Date

Attach a
VOIDED Check
and not a
deposit slip to
ensure proper
processing