



P.O. Box 1037
112 S. 17th St.
Parsons, KS 67357
(620) 421-7030
fax (620) 421-7089

AUTOMATIC BILL PAYMENT

Why would I want to sign up for Automatic Bill Payment?

By signing up for automatic bill payment, your monthly utility bill will be automatically deducted from the checking or savings account of your choice somewhere around the 12th day of each month. You will eliminate the need to write a check every month, purchase stamps, and make trips to the mailbox. Once enrolled, you will never have to worry about paying your bill because everything is taken care of automatically.

Will I receive a monthly statement?

Yes. Your monthly statement will be mailed to you approximately 10 days before payment is deducted from your account. You will be able to review the bill and notify us with any questions. Call us with questions before the 5th of the month at (620) 421-7010.

How do I sign up?

- Complete the form below. The name on the bill must match a name on the bank account.
- Attach a voided check.
- Send the completed form to our office.
- Once the form is processed, a "pre-note" is performed which will send a \$0.00 entry to your bank account to verify that proper account and routing numbers have been entered.
- Please allow 1-2 months for application processing. Please continue to pay your bill until "PAID BY DRAFT" appears on your monthly statement.

To sign up, complete the form, attach a voided check, sign the form, & return to: City of Parsons, PO Box 1037, Parsons, KS 67357.

PLEASE PRINT

Name _____ Bank Name _____

Address _____ Bank Address _____

Home Phone (____) _____ Bank Account # _____

Day Phone (____) _____ Checking Account _____ or Savings Account _____

I hereby authorize the City of Parsons to initiate debit entries to my account listed above and the Financial Institution named above, to debit the same to such account for payment of month Water, Sewer, Stormwater, and Sanitation bill. I agree that each payment shall be the same as if it were an instrument signed by me. This authority is to remain in effect until revoked by me in writing. I understand that either the financial institution or the City of Parsons reserves the right to terminate this payment plan. An insufficient check charge will be charged, if applicable.

Signature _____ Date _____