

Automatic Payment Plan Authorization Agreement

To ensure proper bank coding of your transfer, please **ATTACH A CHECK** marked **“VOID”** or a form provided by your bank or credit union with complete routing and account information shown.

Note: Participation in the Automatic Payment Plan is contingent upon our receipt of your signed consent to the provision shown on this form. Keep a copy for your records.

Name of your Bank, Savings & Loan, or Credit Union and Routing Number		
Savings or Checking Account Number		Checking Savings
Customer Name (As shown on financial institution records)		
Service Address		Daytime Telephone No.
City	State	Zip Code
Customer Name on Los Alamos County Account		
Los Alamos County (7 Digit) Account Number and Customer ID number (As shown on your bill)		
Signature. I authorize the named financial institution to make deduction from my account for payment of my Los Alamos County utility and refuse bill.		
		Date:

Customer is advised that utility bills are issued at least twenty days before payments are drafted. The customer is reminded to review their bill upon receipt and advise Customer Care of any questions or discrepancies, if possible before their payment is drafted. Any errors discovered after payment is drafted will be corrected and any resulting credits will be reflected on the customer account or refunded, but the department will not be responsible for any interest, penalties or fees on such amounts if errors are not reported before the due date indicated on the bill. _____ Initials