



CITY OF POQUOSON

Treasurer's Office
Steven D. Clarke, Treasurer

500 City Hall Avenue, Poquoson, Virginia 23662-1996
(757)868-3015 Fax (757)868-3103

Utility EZ Pay Program
Electronic Debit Authorization for Utility Bills

Utility Account #/Service Address: _____

Name(s): _____

Best Phone #: (____) _____

Email Address : _____

Financial Institution: _____

Routing# / Account #: _____

Do you still want to receive a paper bill? Yes or No
If you answer no, I will send an email reminder at the beginning of the month.

Please attach a voided check with the correct bank account number.

Authorization Agreement

I authorize the Financial Institution listed above to accept the automatic payment requests from the City of Poquoson, Virginia and post them to my account.
I am aware that my account will be debited on the date the Utility bill is due, and that I will still continue to receive a copy of my bill for my records.
I understand that, if at any time, I decide to withdraw this authorization, I need only to notify the Treasurer in writing one week prior to the scheduled debit.
I also understand that if I change or close the account at the financial institution listed above, I must notify the City of Poquoson Treasurer's office.
I understand and agree that any mistake or failure of the Financial Institution to pay utilities to the City of Poquoson as specified in this agreement, including penalty as applicable, will remain the responsibility of the undersigned.
I understand and agree that I am responsible for and will pay a return item fee of thirty-five dollars (\$35.00) which will be assessed for each debit that is returned to the City as a "return item" for reasons of "insufficient funds" or "account closed."
I have read and understand the rights and obligations outlined in this agreement.

Signature: _____ Date: _____

Office Use: Start Date: Finance: ACH list: Bank List: Email list: