

## **Direct Debit Billing Program Application**

Customer Name:	Street Address:
Phone:	Email:
, , , , , , , , , , , , , , , , , , , ,	paying when you sign up for our Direct Debit Billing Program. electric and/or water/sewer bill paid directly from your bank
<b>IT'S CONVENIENT</b> Complete and sign the wish to use, and return both to:	form below, write "VOID" across a check from the account you
Belmont Light Direct Debit Billing Program 40 Prince Street Belmont, MA 02478-1927	
	ant to sign up for Debit Billing for my:
□ Belmont Light electric account	□ Belmont DPW water/sewer account
Account #:	Account #:
Direct Billing Information (see right)	0154
Bank Name:	DATE
Bank Routing #:	TO S DOLLARS C Trimer
Check Account #:	MENO
Signature:	Routing # Account #
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Until further notice, the above signature authorizes its successors and/or assigns to debit my checking account for my payment, as directed within this form, on or after the Total Amount Due Date noted on my bill. In the future, the Total Amount Due will automatically be debited from the checking account as indicated.

Debits that are not collected due to insufficient funds may result in a customer charge of \$25 or 1% of the debit amount, whichever is greater, in accordance with the provisions of Massachusetts General Laws Chapter 60, section 57A.

Failure to notify Belmont Light of changes in your bank account that result in non-collection of utility balances will be subject to the above charges.