



Richmond Sanitary District Sewer Billing

Direct Payment (ACH) Enrollment Form

Stop writing checks! You can now sign up for direct checking or savings account payment for sewer bills in four easy steps!

- **STEP 1.** Complete the contact information requested below (please print):

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (____) _____

e-mail address: _____

- **STEP 2.** Provide your City of Richmond service address (address where meter is located):

Service Address: _____

- **STEP 3.** Provide your bank account information:

Name of financial institution: _____

ABA/Routing/Transit Number: _____

Checking Acct. # _____ -or- Savings Acct. # _____

To ensure the correct account number is used for electronic payment and to obtain the ABA/Routing Number, please attach a voided check.



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➤ **STEP 4.** Provide your signature for authorization:

I authorize the City of Richmond to deduct my payments from the checking or saving account listed above. I understand that all information provided will remain confidential. I understand that I can discontinue this payment service at any time by notifying the City of Richmond in writing with a two (2) week notice. I understand that if my payment is returned for any reason an NSF fee will be charged, the payment will be reversed and late penalties will be applied to my account.

Signature: _____ Date: _____

Mail completed form to:

**Richmond Sanitary District
Sewer Billing
P.O. Box 308
Richmond, IN 47375**