



# Automated Clearing House (ACH)

Date: \_\_\_/\_\_\_/20\_\_\_

Account Holder Name:

\_\_\_\_\_

Service Address

\_\_\_\_\_ Madera, CA 9363\_\_

Mailing Address (If different than above)

\_\_\_\_\_

Phone No:

(        )  
\_\_\_\_\_

I would like to have payments withdrawn from my checking account monthly for utility account # \_\_\_\_\_ for address \_\_\_\_\_ to take effect immediately. I have provided a voided check for your records.

I would like to cancel any ACH payments on utility account # \_\_\_\_\_ due to a change and/or canceled bank account.

I would like to change ACH Bank information on utility account # \_\_\_\_\_ for address \_\_\_\_\_. I have changed banks and would like to update the bank account information for your records and start withdrawing payments from a new bank account. I have provided a voided check for your records.

***I authorize the City of Madera to instruct my bank/credit union to deduct my payments from the checking account listed on the enclosed voided check. I understand that I control my payments and if at any time I decide to discontinue this payment service, I will notify the City of Madera Finance Department in writing.***

Signature:

\_\_\_\_\_

**PAYMENTS WILL BE WITHDRAWN FROM YOUR BANK ACCOUNT ON THE CORRESPONDING DUE DATE EVERY MONTH.**

CITY OF MADERA  
FINANCE DEPARTMENT  
205 W 4TH ST  
MADERA, CA 93637  
559-661-5459  
[utilitybilling@madera.gov](mailto:utilitybilling@madera.gov)