



City of Niles Direct Pay Program

The direct pay program allows you to pay your utility bill each month without having to write a check or make a trip to our office! It is easy, convenient and automatic! All you need to qualify is a banking account, and a utility account in good standing (no past due balance). All you need to do is authorize your financial institution to withdraw the amount you owe on your monthly bill from your account and pay us. You will still receive a monthly statement itemizing your bill in plenty of time in case you have any questions. Direct Pay will give you one less thing to worry about.

**NO MORE WRITING CHECKS!
NO MORE POSTAGE!
NO MORE WORRY ABOUT PAYING YOUR BILL ON TIME!
NO MORE FEAR THAT YOUR PAYMENT IS LOST IN THE MAIL!**

To sign up for Direct Pay, simply fill out the application below and return with a voided check (or you can bring it to our office). The automatic withdrawal should start on the second billing cycle after we receive your completed application. Payments will be drawn on your due date or the next banking business day.

Q. What if I have a Question about my bill?

A. Just give us a call at 683-4700 and ask for Billing.

Q. When will this take effect?

A. Continue to pay your account until the notice on your bill states, "DO NOT PAY – AUTO DEBIT PAYMENT".

Q. What if I don't have enough money in my account?

A. We will be notified electronically by your financial institution. It will be considered an NSF check, which is subject to fees and additional penalties.

Q. What if I move or decide to get out of the program?

A. If you move or change financial institutions, a new application must be filled out. If you decide to discontinue, simply notify our office.

Q. How much does it cost?

A. Participating in Direct Pay is free!

DO NOT E-MAIL THIS COMPLETED APPLICATION

The City does not accept completed applications submitted through email. They will not be processed. Applications can be mailed or dropped off at City Hall, 333 N. 2nd Street, Niles, MI 49120 during business hours, or by placing in the night drop box located in the drive-thru. Thank you for your cooperation.

DIRECT PAY APPLICATION

Customer Name (Last)	(First)	(Middle)	Utility Acct#
Service Address	City	State	Zip
Mailing Address (If different from above)	City	State	Zip
Name of Financial Institution			
Address of Financial Institution	City	State	Zip
Bank Routing No. (First 9 digit number on left at bottom of check)		Checking/Savings Acct#	

I (we) hereby authorize the City of Niles Utilities Department to initiate debit entries to my (our) checking/savings account indicated above in the named Financial Institution. The debits will be made monthly and I (we) will continue to pay my (our) bill by check (or other means) until I (we) are notified that my (our) Direct Pay service has started. This authority will remain in effect until I (we) or the City of Niles Utilities Department give written notification to terminate this agreement.

Phone

Signature

Date