



## DIRECT PAYMENT OPTION-CREDIT/DEBIT

We are pleased to offer you a Direct Payment Plan. Now you can have your payment made automatically on your MasterCard, Visa, American Express or Discover.

### The Direct Payment Plan will help you in several ways:

- It saves time - fewer checks to write
- Helps meet your commitment in a convenient and timely manner - even if you are on vacation or out of town
- No lost or misplaced statements, your payment is always on time - it helps maintain good credit
- It saves postage
- It is easy to sign up for, easy to cancel and no late chargers!

### Here is how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made to your MasterCard, Visa, American Express or Discover. Then, just sit back and relax. **Your payments will be made automatically on the date your bill is due (or Monday if the due date falls on the weekend) each month.** Proof of payment will appear with your statement.

The authority you give to charge your account will remain in effect until you notify us in writing or contact our office to terminate the authorization.

The Direct Payment Plan is dependable, flexible, convenient, and easy. To take advantage of this service, complete the information below and return it to us.

### AUTHORIZATION

I authorize the City of Goodview to initiate charges to my MasterCard, Visa, American Express or Discover. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the City of Goodview a reasonable opportunity to act on it. I can stop payment of entry by notifying the City of Goodview 3 days before my account is charged.

Please write your name as it appears on your credit/debit card and use the address associated with your card. **Please print clearly.**

Name: \_\_\_\_\_ Utility Acct #: \_\_\_\_\_

Credit/Debit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Property Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Check box if the card address is the same as the property address.

Address Associated with Card: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Entered By: \_\_\_\_\_

Entered On: \_\_\_\_\_

Start In: \_\_\_\_\_