



Village of Monroeville  
21 N Main St. ~ P.O. Box 156  
Monroeville, Ohio 44847  
Ph: 419-465-2922 Fax: 419-465-2259  
Email: [AdminOffice@MonroevilleOhio.com](mailto:AdminOffice@MonroevilleOhio.com)  
Website: <http://www.MonroevilleOhio.com>

### MONROEVILLE UTILITIES AUTOMATIC PAYMENT DEDUCTION

The Village of Monroeville offers automatic bank deduction of your monthly utility bill from a checking or a savings account. This payment option provides the convenience of paying your bill on time, every time. In order to participate, you will need to complete our Utility Payment Automatic Transfer Authorization Form (attached). Once you complete and turn in the form, the amount of your Monroeville utilities invoice will be deducted from your chosen account each month on the due date. Utility payments are due by the 10<sup>th</sup> of every month.

You will continue to receive a utility bill each month indicating the amounts of the water, sewer, electric and other charges that are due. Once you have been activated for the automatic payment plan, a message will be stamped on your bill indicating "AUTOMATIC PAYMENT PLAN." **Continue to pay your utility bill each month until you see this message on your bill.** Once the message is on your bill, your payment will be automatically deducted from your chosen bank account.

It usually takes 1-2 billing cycles for enrollment to take effect. Sign up today and start enjoying the convenience of automatic deduction! If you have any questions, please contact the Administrative Office.

#### ~Important information to remember~

- Utility payments are due on the 10<sup>th</sup> of each month. If the 10<sup>th</sup> falls on a Saturday, the withdrawal date will be on Friday, the 9<sup>th</sup>. If the 10<sup>th</sup> falls on Sunday, the withdrawal date will be on Monday, the 11<sup>th</sup>. If the 10<sup>th</sup> is on a Monday that is a holiday, the withdrawal will be on Tuesday, the 11<sup>th</sup>.
- Please continue to make payment until your utility bill has the AUTOMATIC PAYMENT PLAN stamp.
- We aren't able to debit Money Market or Investment Accounts.
- We will try to debit your bank account once. If there are insufficient funds, a non-sufficient funds (NSF) fee will be added to your utility account and you will be responsible for making payment to the Administrative Office. Automatic payment will resume when your account is current. If a utility account is NSF more than twice, it will be removed from the auto-payment plan.
- This authorization will continue in effect until the utility customer notifies the Administrative Office in writing, at least 10 days prior to the next billing.
- PLEASE ALLOW FOR ONE TO TWO BILLING CYCLES FOR AUTOMATIC PAYMENTS TO BE ACTIVATED

Authorization forms and/or requests to terminate Automatic Deduction can be mailed to the Village of Monroeville P.O. Box 156 Monroeville OH 44847 or placed in the drop box at the Administrative Office 21 N Main St. Monroeville OH 44847.



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### UTILITY PAYMENT AUTOMATIC TRANSFER AUTHORIZATION

In order to provide convenient automatic monthly payments of my utility bill, I hereby authorize the Village of Monroeville Administrative Office to electronically transfer funds from my checking or savings account to my Monroeville Utility account(s) designated below. The total amount authorized to be transferred each month will be the exact amount indicated on my utility bill. I understand that if my bank cannot pay this transfer, my utility account will be considered delinquent. This authorization includes any adjusting entries to correct errors.

Name on the utility account(s):

\_\_\_\_\_

Service Address and Telephone Number:

\_\_\_\_\_

Utility Account #(s):

\_\_\_\_\_

\_\_\_\_\_

Name and Address of Financial Institution:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Bank Routing #: \_\_\_\_\_  
(FIRST SET OF NUMBERS ON BOTTOM OF CHECK)

Bank Account #: \_\_\_\_\_  
(SECOND SET OF NUMBERS ON BOTTOM OF CHECK)

CHECKING  
(Please attach a voided check.)

SAVINGS

Account Holder's Name(s):

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
(SIGNATURE AND DATE)

\_\_\_\_\_  
(SIGNATURE AND DATE)

**BOTH PARTIES OF A JOINT ACCOUNT MUST SIGN AND DATE.**