

YOU MAY CHOOSE ONE OR BOTH ENROLLMENT OPTIONS

**PAPERLESS BILLING ENROLLMENT
CITY OF EATON RAPIDS**

AUTHORIZATION TO EMAIL BILLS

NAME: _____

ACCOUNT #: _____

EMAIL ADDRESS: _____

email only

both email and paper billing

**AUTOMATIC UTILITY BILL PAYMENT
ENROLLMENT FORM**

NAME: _____

ACCOUNT #: _____

BANK NAME: _____

ROUTING #: _____

CHECKING # _____ SAVINGS # _____

I AUTHORIZE THE CITY OF EATON RAPIDS TO DEDUCT MY UTILITY PAYMENTS FROM
THE ACCOUNT LISTED ABOVE.

SIGNATURE _____ DATE: _____