



FINANCE DEPARTMENT

## **CITY OF MEQUON UTILITIES**

## **AUTOMATIC PAYMENT AUTHORIZATION**

I authorize the City of Mequon through my designated bank to automatically withdraw, on a quarterly basis, the amount due on my utility account and transfer to the City of Mequon's bank account. Funds will be withdrawn on the invoice due date of the quarterly billing. I will promptly let the department know about any account information changes and supply updated paperwork before the bank transfer date.

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mail Address:				
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		10 25		
Continue to pay your	<i>Please Note</i> – Allow o utility bill until you receive a		•	deduct will oc
Authorized S	ignature		Date	
Return the completed	application via email, drop b	ox or mail to t	the Finance Dep	artment at M
City Hall. Application	is void if incomplete or altere	d.		

Email: utilityclerk@ci.mequon.wi.us

Finance Office: (262) 236-2947

City of Mequon 11333 N. Cedarburg Rd. Mequon, WI 53092