

VILLAGE OF RAVENNA
12090 CROCERY CREEK DR RAVENNA, MI 49451
231-853-2360

AUTOMATIC PAYMENT SIGN UP SHEET

Checking Account _____ Savings Account _____

Water Payment Information **Applicants phone number** _____

Name _____

Service Address _____ Account number _____

City _____ State _____ Zip _____

Bank Name _____ Start Date _____

Routing Number _____ Account Number _____

Sewer Payment Information **Applicants phone number** _____

Name _____

Service Address _____ Account number _____

City _____ State _____ Zip _____

Bank Name _____ Start Date _____

Account Number _____ Routing Number _____

Refuse Payment Information **Applicants phone number** _____

Name _____

Service Address _____ Account number _____

City _____ State _____ Zip _____

Bank Name _____ Start Date _____

Account Number _____ Routing Number _____

******* All payments are withdrawn on the 15th of the month the bill is due*******

SIGNATURE _____ **DATE** _____

****A Non-sufficient funds charge of \$25 will apply if The Village of Ravenna attempts to debit your account and the funds are not available on the date indicated above****