

Save Time 

Save Money 

The Sandy Township Municipal Authority is pleased to announce that residents will now be able to pay their utility bills using the ACH Debit payment option.

By signing up for the ACH Debit Payment Option, residents will authorize the Sandy Township Municipal Authority to withdraw the amount of their utility bill directly from their checking account. This transaction will happen automatically, eliminating the need for the resident to pay their utility using the conventional methods of writing a check and mailing in the payment or dropping it off at the Municipal Building drop box.

ACH Debit Transaction – FAQ

What are the benefits?

- No check, stamp or money order fees
- Avoid late payment penalties
- Payments are made even when you are away from home

How will I know my payment has been made?

You will see an itemized entry on your bank statement that describes the payment you have made to Sandy Township Municipal Authority.

What happens if I change my bank or want to discontinue participation?

To stop participation or change your banking information, just fill out a new form and mark the appropriate change that you are making.

Why does the Municipal Authority ask for a voided check?

The Municipal Authority uses the account numbers which appear on the bottom of your check to set up the ACH Debit transaction. These numbers can be difficult to read so sending a voided check ensures that your payment will be processed properly.

ACH DEBIT AUTHORIZATION INSTRUCTIONS – PLEASE COMPLETE ALL STEPS:

1. Complete the attached form. If your account is a joint account, both account holders must sign this form.
2. Attach a voided, unsigned check to the form.
3. Return the original form and the voided check to the Sandy Township Municipal Authority.
4. Retain a copy for your files.

The Municipal Authority must receive the signed authorization form 20 days prior to the next scheduled ACH debit transaction date.

UTILITY BILL

ACH DEBIT AUTHORIZATION TERMS AND CONDITIONS

- The Sandy Township Municipal Authority will directly charge the bank account you specified for the amount due on your utility bill. You will continue to receive a Sandy Township Municipal Authority utility bill. On the due date listed on the bill or the first working day following the due date, your financial institution will automatically deduct the payment from your bank account and the Municipal Authority will credit the payment to the specified utility account.
- You must continue to pay your utility bill until you receive one with a message displayed stating “DIRECT DEBIT - Do Not Pay.” This message will show up after your enrollment has been successful.
- Termination of the agreement will not be effective until the Sandy Township Municipal Authority has received an ACH Authorization form, marked “Withdraw”. The form must be received in such time and in such manner as to give the Municipal Authority a reasonable opportunity to act upon it.
- The Sandy Township Municipal Authority will assess a Returned Check Fee on any payment returned by the financial institution. In the event that the Sandy Township Municipal Authority receives two insufficient funds notices from your financial institution within a twelve-month period the ACH Debit Authorization will be cancelled.

SANDY TOWNSHIP MUNICIPAL AUTHORITY

P. O. Box 443
DuBois, PA 15801
(814) 371-4220
<http://water.sandytownship.org>

UTILITY BILL ACH DEBIT AUTHORIZATION FORM

***** A VOIDED CHECK MUST BE ATTACHED TO ENROLL OR CHANGE BANK ACCOUNTS *****

I wish to: Enroll _____ Withdraw _____ Change Bank Information _____

CUSTOMER NAME(S) as they appear on your bank account

1.) _____

2.) _____

MAILING ADDRESS: _____ CITY _____ STATE AND ZIP CODE _____

PHONE NUMBER _____

PROPERTY ADDRESS _____

SANDY TOWNSHIP MUNICIPAL AUTHORITY ACCOUNT NUMBER:

I(We), the undersigned, hereby authorize the Sandy Township Municipal Authority ("Authority") to initiate debit entries from the account listed below for payment of utility bills and if necessary, to initiate credit entries and adjustments for any debit entries in error to my bank account at the financial institution (BANK) named below. The draft will be made monthly on the due date listed on the utility bill or the first working day following the due date. I (we) understand that I am responsible to verify that the debit was properly made and that it was for the correct amount. In the event of an error, I (we) will contact the Authority as soon as possible.

BANK / DEPOSITORY NAME _____ BRANCH ADDRESS: _____

CITY _____ STATE _____ ZIP _____

BANK ROUTING NUMBER _____ ACCOUNT NUMBER _____

This Authorization is to remain in full force until AUTHORITY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford AUTHORITY and BANK reasonable opportunity in which to act.

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

This form must be received 20 days prior to the next scheduled ACH debit transaction date.