

# City of Rutland

Authorization Agreement for Pre-authorized Payments of Taxes And/or Utility (City Water & Sewer) Bills  
***Easy, No Hassle...Never Miss a Payment!\****

Name: \_\_\_\_\_

Property Location: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number of Owner: \_\_\_\_\_

Account Number/Parcel ID#: \_\_\_\_\_ (parcel ID on tax bill, account number on water & sewer bill which will be the same number for both)

***THIS FORM NEEDS TO BE RETURNED TO OUR OFFICE THREE WEEKS PRIOR TO THE DUE DATE THAT YOU WANT THIS TO BEGIN.***

***Note: Your account must be current to enroll in this program. Thank you.***

\_\_\_\_ Please pay my **property taxes** by automatic payment on the due dates of August 31, November 15, February 15 and May 15, or the next business day if the due date is a holiday or weekend.  
*Available to City taxpayers only.*

\_\_\_\_ Please pay my **utility bill** (City water & sewer) on the due dates of November 1, February 1, May 1 and August 1, or the next business day if the due date is a holiday or weekend. *Available to City ratepayers and all water & sewer customers billed by the City of Rutland (but NOT SEWER accounts billed to Rutland Town or Alpine).*

I hereby authorize the City of Rutland to initiate debit/credit entries to my account below for the full tax amounts and/or utility bills (City water & sewer) due on the dates stated above. If the date falls on a holiday or weekend the transaction will occur on the following business day. If funds are not available in the account on the day of the transaction a 5% penalty on the tax amount due and a \$40.00 return fee will be assessed. Funds unavailable for the last tax quarter payment in May will also be assessed an additional 8% collector's fee. The City reserves the right to remove this service from my account if the payments are late or unpaid due to lack of funds available and may require a substitute payment in the form of a bank check or cash to bring the account current.

This written authority is to remain in full force and effect until a written notice is received from me to terminate this agreement, or the City terminates this agreement due to lack of funds, or delinquent account status. I will contact the City of Rutland if I sell or transfer the property or if I change my account from which this payment will be taken.

***You must attach a voided check with bank routing number and account number to facilitate this request!  
(A DEPOSIT SLIP IS NOT ACCEPTABLE)***

Bank or Credit Union Name: \_\_\_\_\_ ABA# \_\_\_\_\_

**Circle Type: Checking -or- Savings** Account # \_\_\_\_\_ (Verify with financial institution.)

Bank Address: City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*\*subject to funds availability as noted above.*

**Return or mail the original to: City Of Rutland Treasurer's Office, 52 Washington Street,  
PO Box 969, Rutland, VT 05702 Phone: 802-773-1800**

revised 10/25/2013