

300 E Maple St Columbus, KS 66725 Phone: (620) 429-2159

Fax: (620) 429-1159

AUTO-PAY ENROLLMENT FORM

We now offer Auto-Pay. Your payment is automatically deducted from your bank account. You will still receive your bill, showing in advance the exact amount and date your bank account will be debited. Payment will be verified each month on your bank statement. If you wish to cancel Auto-Pay, simply contact us.

To sign up for Auto-Pay, complete the attached enrollment form and return with your payment to:

City of Columbus 300 E Maple St Columbus KS 66725

Name		Address		
City, State, Zip Code				
YES! I want to take advantage of Auto-Pay When you choose this option please supply all of the information requested to the right.			I hereby authorize The City of Columbus The City of Columbus to charge my monthly water, sewer and garbage bill electronically to my:	
			☐ Checking	☐ Savings at
Bank or Saving	gs Institution			
	d a VOIDED CHECK t es. Please check your	_	ng account for this p	urpose. Auto-Pay drafts occur on the
☐ 1st	☐ 5th	☐ 15th		
I understand t	hat I may cancel this	agreement at a	any time simply by co	ntacting City Hall at 429-2159.
Authorized Signature			Date	
City Account N	Number			