



City of Glendale Automatic Payment Service Authorization Agreement

Please return completed Surepay application with **cancelled check (checking)- deposit slip (savings)** to:
City of Glendale Billing Services
5850 W. Glendale Ave. Glendale AZ 85301

Within two billing cycles, a message will be printed on your billing statement advising you that your automated payment service is active. Please review your bill and, if there are any questions, contact a customer service representative at (623) 930-3190. Once active on Surepay, funds will withdraw approximately within 21 days of bill date.

Account Name (as shown on City of Glendale bill) _____ Utility Account Number _____

Payer Name (if different than Account Name) _____ Telephone Number _____

Service Address _____

Mailing Address _____

Financial Institution Name _____

Address _____

Bank Routing Account Number _____ Bank Account Number _____

(Include all numbers beginning on lower left side of check. Please remember to include a **voided check**)

TYPE: Checking - Savings - Share Draft

From The Heart



Compassion for and helping our neighbors comes "From the Heart"! You can make a difference and help your neighbors in need by donating to From the Heart, a voluntary program that awards grants to local non-profits that provide essential health and human service programs. Please indicate by checking the box below that you wish to add \$2 to your monthly bill to donate to From the Heart.

YES

NO

Surepay Authorization Agreement

I hereby authorize the City of Glendale and the financial institution designated on this application to charge the account I have specified for payment of my monthly City of Glendale Utility bill. Should funds not be available in my bank account, the utility account will be placed in delinquent status, assessed a fee, and collection actions may be taken. The City of Glendale reserves the right to revoke this service when a history of non-sufficient funds occurs.

This authorization will remain in effect until the City of Glendale is contacted in writing or by phone at (623) 930-3190. A minimum of two weeks will be required to respond to a request to revoke authorization for Automatic Payment Service.

Signature _____ Date _____

N:BILL_SUP//FORMS/\$2SUREPAY.doc