



BOARD OF PUBLIC WORKS

CITY OF HANNIBAL

OFFICE 573-221-8050
FAX 573-221-7522
www.hannibalbpw.org

ELECTRIC, WATER AND SEWER DEPARTMENTS

3 INDUSTRIAL LOOP DRIVE • PO BOX 1589 • HANNIBAL, MISSOURI 63401-1589

AUTOMATIC BILL PAYMENT PROGRAM

Dear Customer:

Thank you for your interest in having your monthly utility payment electronically debited from your bank account.

Below is the authorization form for Automatic Bill Payment for your completion. The form authorizes the Hannibal Board of Public Works (HBPW) to initiate monthly electronic debit entries to your bank account for your electric, water and sewer utility payment. **Please complete and return the form along with a voided check.** We must receive your signed authorization thirty (30) days prior to the first debit date.

Electronic debit from your bank account will be drafted on the due date printed on your monthly billing statement. The Automatic Bill Payment program is provided for your benefit and convenience. Electronic payment will eliminate your responsibilities for submitting utility payments.

You will continue to receive your monthly billing statement ensuring you of the amount that will be deducted from your bank account. A debit entry will also show on your bank statement corresponding to your monthly billing statement.

You may discontinue the Automatic Bill Payment Program by providing us with written notice 10 days prior to the next scheduled debit date. Service transfers require new sign-up authorization and may change your debit date.

Due to the automated nature of the service, it is the customer's responsibility to maintain adequate account balances and to notify the Business Office of changes that may effect your payment. If the account has non-sufficient funds, you will be notified immediately and shall be required to make your payment plus an insufficient charge with cash or money order. In addition you will be removed from Automatic Bill Payment.

The Hannibal Board of Public Works offers the Automatic Bill Payment Program to benefit and provide the customers with better service. Thank you for considering this service. Should you have any additional questions, please contact our Business Office at (573) 221-8050.

Sincerely,

Hannibal Board of Public Works

A handwritten signature in cursive script that reads 'Lillie Lewton'.

Lillie Lewton, Business Office Manager



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AUTOMATIC BILL PAYMENT ACCOUNT AUTHORIZATION FORM

The Hannibal Board of Public Works is hereby authorized to debit my banking account listed below through the Automatic Bill Payment program. My bank account will be debited for the current amount due and funds will be applied to my utility account listed below.

This authorization will begin on the date listed below and will remain in effect until terminated by written notice from the Hannibal Board of Public Works or myself. Written notice must be received by the Hannibal Board of Public Works within ten (10) days prior to the next scheduled debit date. It is the Hannibal Board of Public Works intention to debit my account on the scheduled business day of each month as listed below. I understand that a non-sufficient funds (NFS) fee will be charged if any item is returned for any reason. If a debit is returned for any reason, I must remit payment plus NFS charges within ten (10) days by cash, bank draft or money order. Failure to make the payment could result in termination of service without further notice.

Account Number:	_____
Payment Debited Date:	_____ <u>Date Printed on the Monthly Billing Statement</u>
Customer Name:	_____
Telephone Number:	_____
Service Address:	_____ <u>Hannibal, MO 63401</u>
Mailing Address:	_____
Bank Name:	_____
Bank Account Number:	_____
Bank Routing Number:	_____
Customer Signature:	_____