CITY & BOROUGH OF SITKA
AUTOMATIC PAYMENT (AUTO-PAY) BY CREDIT CARD

☐ Initial Request ☐ Change ☐ Cancellation

This agreement between the Customer and the City & Borough of Sitka (City) authorizes the City to collect payments for utility bills by charging the Customer's credit card.

CUSTOMER NAME: _____

MAILING ADDRESS: _____

HOME PHONE: _____ WORK/MESSAGE PHONE: _____

CITY UTILITY ACCOUNT NO.: _____ - _____ (one form per account)

SERVICE ADDRESS: _____

NAME: _____
(as it appears on credit card)
CREDIT CARD TYPE: _____ VISA _____ MASTERCARD
CREDIT CARD NO.: _____-_____-_____-_____
EXPIRATION DATE: _____/_____

As an enrollee in this program, I understand that:

1. I will receive a bill each month even though I am on the automatic credit card payment plan. It will tell me the amount of my utility bill that was charged to my credit card account.
2. If I enroll after my bill has been generated, I will need to make payment arrangements for that month's payment. The next month's payment will be automatically charged to my account.
3. The payment will be charged to my credit card account the day my bill is mailed.
4. If my credit card account is declined for any reason, the City will attempt to contact me for alternate payment arrangements. My account will be subject to normal credit procedures and non-sufficient funds charge of $25. If my payment is declined twice within a 12 month period, the City may cancel my participation in this program.
5. No more than one credit card company will be billed for each utility account.
6. If my credit card number changes, I will notify the City of the new account number. **I will also notify the City of a change in the credit card expiration date because the expiration date is necessary to process my payment.** If I fail to provide this information prior to the payment date and the City is unable to process my payment, I will be responsible for an alternate payment arrangement and any late fee or non-sufficient funds charge that results.
7. I will notify the City at (907) 747-1831 if I wish to cancel this agreement.
8. The City may cancel this agreement at any time with written notice.

By signing this authorization, the Customer acknowledges that he/she has read and agrees to all of the above.

CUSTOMER SIGNATURE: _____ DATE: _____

CARDHOLDER'S SIGNATURE: _____ DATE: _____

Please return this form to City & Borough of Sitka, 100 Lincoln Street, Sitka, AK 99835 or fax to (907) 747-4779. For more information call Utility Customer Service at (907) 747-1818 or 747-1881.

Revised November 2009