

City of Terre Haute Automatic Bill Payment Update Information – Sewer Services

I am currently enrolled in Automatic Bill Payment and my banking information has changed. Please update my City of Terre Haute account to reflect the new information below. I understand that my current Automatic Bill Payment may be delayed due to the change and I have made other arrangements for payment. Depending on the type of payment method you choose, please provide a voided check, savings deposit slip, or a photocopy or your credit card.

Please continue to pay your bill until your statement indicates the ABP option has started. Allow 4-6 weeks for processing.

Required Information to Process Your Reque	est				
Name as it appears on your City of Terre Haute Bill		10 Digi	10 Digit City of Terre Haute Sewer Account Number		
10 Digit City of Terre Haute Sewer Premise Number			Email Address		
Option 1: Checking or Savings Account	Туре	☐ Checking	☐ Savings (check one)		
Name (exactly as it appears on financial institution	ion records)	Name o	of Financial Institution		
Routing Number (9 digit number at bottom of your check)			Checking or Savings Account Number		
I authorize the financial institution named above Terre Haute. This authority will remain in effect terminate this authorization.					
Financial Account Holder Signature	Date	Financi	al Account Holder Signature	Date	
Option 2: Credit Card Type	□ Visa □ l	Master Card [l Discover □ American Expres	ss (check one)	
Name (exactly as it appears on credit card)		Billing	Address (exactly as it appears on	credit card records)	
Credit Card Account Number		Expirat	ion Date		
I authorize the City of Terre Haute to charge the remain in effect until I give written notification,					
Credit Card Holder Signature		Date			
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