AUTHORIZED AGREEMENT FOR:
DIRECT PAYMENT OF REAL ESTATE AND MOBILE HOME TAXES

(Please Print or Type)

_____ _____

Name as shown on bill | Daytime Phone Number

_____ _____

Address as shown on bill | City, State, Zip

Financial Institution:_____

Routing/Transit Number:_____

Checking Account Number:_____

Savings Account Number:_____

I (We) hereby authorize the Auglaize County Treasurer hereinafter called COMPANY, to initiate electronic entries to our consumer account.

Indicated above, and the Financial Institution named above to debit/credit the same to such account for payments, deposits or error corrections.

This authority is to remain in full force and effect until COMPANY has received written notification from us of its termination in such time and in such manner as to afford COMPANY and Financial Institution a reasonable opportunity to act upon it. (minimum of one week prior to withdrawal).

_____ _____

Authorized Signature | Date

PLEASE CHOOSE ONE WITHDRAWAL OPTION

(If the 15th falls on a weekend the deduction will be taken the Friday before)

	PARCEL ID #
(501) Semi-Annual tax amount for Real Estate deducted February 15th and July 15th.	☐☐☐-☐☐☐-☐☐☐-☐☐
(502) Monthly Escrow of Real Estate deducted 15th of every month.	☐☐☐-☐☐☐-☐☐☐-☐☐
(503) Semi-Annual tax amount for Mobile Home deducted February 28 and July 31.	☐☐☐-☐☐☐☐☐
(504) Monthly Escrow of Mobile Home deducted 15th of every month	☐☐☐-☐☐☐☐☐
(001) Annual tax amount deducted February 15th.	☐☐☐-☐☐☐-☐☐☐-☐☐

PLEASE ATTACH VOIDED CHECK HERE: