MOUNT LAUREL TOWNSHIP AUTHORIZATION AGREEMENT FOR DIRECT DEBIT PAYMENTS (ACH DEBIT) FOR PROPERTY TAX PAYMENTS

CHECK ONE:	New Authorization	Change Account Number	or Depository	<u> </u>
depository financial in	nstitution named below,	DUNT LAUREL, to initiate debit entrester to initiate debit entrester called depository, and to transactions to my (our) account	o debit the same to	such account. I
DEPOSITORY NAME BRANCH TOWNSHIP STATE ZIP				
**MUST INCLUDE A	VOIDED CHECK			
ROUTING #				
ACCOUNT #				

This authorization is to remain in full force and effect until the Township has received written notification from me (or either of us) of its termination in such time and in such manner as to afford the Township and Depository a reasonable opportunity to act on it. The Township is not responsible for any overdraft or other charges imposed by the depository listed above as a result of this service. I (we) acknowledge that I (we) am/are responsible for all fees in connection with the transaction or cancellation thereof in connection with this agreement. I (we) agree to hold the Township harmless from and against all claims arising out of this agreement. I (we) acknowledge that I (we) am/are the only owners of the account listed above. No other individuals have any rights to the account listed above.

Tax Payments: I (we) understand that my/our account will be debited on the 1st of each quarter or the next business day thereafter if the 1st should fall on a weekend, holiday or a day the Township is otherwise closed.

NAME(S) PROPERTY LOC MAILING ADDRESS			
BLOCK/LOT/QUAL		DAYTIME PHONE #	
DATE	SIGNATURE		

PLEASE RETURN THIS FORM & A VOIDED CHECK TO THE TAX COLLECTORS OFFICE, 100 MOUNT LAUREL ROAD, MOUNT LAUREL NJ 08054

*FORMS NOT FULLY COMPLETED, DATED AND SIGNED, OR LACKING A VOIDED CHECK, WILL BE RETURNED FOR COMPLETION AND MAY RESULT IN A DELAY IN PROCESSING YOUR REQUEST.