City of Rochester Hills Treasurer's Office

SUMMER AND WINTER PROPERTY TAXES

Recurring Automatic Bill Payment Enrollment Form

Follow these 4 easy steps to maximize your time!

#1	Complete the inform	ation below:						
	Taxpayer Name							
	Property Address Parcel #							
		e Phone E-mail address						
#2	Provide the required financial information below:							
	Name of Financial In	stitution						
	Routing #							
	Account Number			_	ecking	□ Savings	1	
	A COPY OF A VOIDED CHECK IS REQUIRED to ensure the correct account and ABA/routing numbers are used for this electronic payment.							
	Provide your signature for authorization:							
	I hereby authorize the City of Rochester Hills to deduct the full amount of my summer and winter property tax bills from the checking or savings account listed above on the following recurring dates (bank processing):							
	Summer Taxes: Due Date - September 14 (UNLESS IT FALLS ON A WEEKEND, THEN NEXT BUSINESS DAY)							
	Winter Taxes: Last Business Day of December OR Due Date - February 14 (UNLESS IT FALLS ON A WEEKEND, THEN NEXT BUSINESS DAY)							
	I understand that all information provided will remain confidential. I understand that it is my responsibility to confirm the city has received and processed my enrollment form. I understand that a fee will be charged if my payment is returned for any reason and that my taxes will be considered unpaid and subject to interest and/or penalty if not paid by summer and winter due dates. If at any time I decide to discontinue this payment service I will notify the City of Rochester Hills in writing no less than 14 days prior to the scheduled payment date.							
	THIS FORM CANNOT BE PROCESSED WITHOUT YOUR SIGNATURE							
	SIGNI	ure		Date	e			
	*** PLEASE COMPLETE THE UPPER PORTION AND RETURN THE ORIGINAL TO THE CITY ***							
#4	Complete this section <u>and</u> remove for your records:							
	On (insert today's date) I authorized the City of Rochester Hills to deduct the full amount of my summer and winter property tax bills using the following financial institution information.							
	Name of Financial Institution							
Deput	of Rochester Hills ty Treasurer Linda Osieck Rochester Hills Drive			Clie	AKIIIB	□ Savings		

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