



106 15TH AVE N
PO BOX 130
BANGOR, WI 54614

Phone (608) 486-2151
Fax (608) 486-2951

ACH PAYMENT FORM

I authorize the financial institution listed below to charge my:

- Checking Account**
- Savings Account**

and Remit payment for my monthly utility bill to Bangor Municipal Utility.

Please print all of the following information:

Name (as it appears on utility bill)

Utility Acct No.

Customer Phone Number

Name of Financial Institution

Routing Number

Account Number

Name of Account Holder
(if different from above)

Authorized Signature

(date)

Payments will be withdrawn and applied to utility account on the 20th of each month. If the 20th falls on a weekend or holiday, withdrawal will take place on the next business day.

Please attach a voided check and return to: Bangor Municipal Utility.
Form and check copy can also be emailed to: mjustinger@villageofbangor.com

