



**Charter Township of Orion
Department of Public Services
Water & Sewer Division**

2525 Joslyn • Lake Orion, Michigan 48360 • (248) 391-0304 Ext 8503 Fax: (248) 393-6842

Water/Sewer Auto Payment Enrollment Form

Water/Sewer Account Number: _____ - _____ - _____

Name: _____

Service Address: _____

Telephone Number: () _____

Email Address: _____

Name of Financial Institution: _____

ABA/Routing Number: _____

Checking OR Savings

Account Number: _____

**Please
Attach
A
Voided
Check**

I authorize The Charter Township of Orion to deduct my Water/Sewer payment from the Checking or Savings Account listed above on the due date of my bill. If I decide to discontinue this payment service, I will send notification to the address below. Water/Sewer bills will be emailed to me at the email that I have provided and I will no longer receive a paper bill. I understand that a \$35.00 NSF fee shall be charged if funds are insufficient to pay the full amount at the time of withdrawal. My information is confidential and will be kept in a secure location in the Water/Sewer Division office.

Signature: _____ Date: _____

**ACH ENROLLMENT FORM
IS DUE BY THE 15TH
OF THE MONTH
PRIOR
TO YOUR
BILLING DUE DATE**

Please mail completed form to:

Charter Township of Orion
Water & Sewer Division
Attn: Marsha Carroll
2525 Joslyn Road
Lake Orion, MI 48360

**You will be notified
by email when your
Auto Pay has been
set up and is active**