

Semi-Annual Autopay Authorization

Name: _____

Property Address: _____

Parcel Number: _____

Phone Number: _____

Email: _____

Bank Name: _____

Type of Account: _____

Routing Number: _____

Account Number: _____

Attach Voided Check or Deposit Slip Here

In place of a voided check or deposit slip, you may provide a statement from your bank on their letterhead indicating the account holder's name, routing number, account number, and type of account (checking or savings).

This request will not be in effect without a voided check or deposit slip, or a letter from your bank.

I hereby authorize the Butler County Treasurer's Office to initiate debit entries (and appropriate credit entries) to my account indicated above for property tax payments. Debits will occur on the semi-annual tax due dates. This authorization will be in effect until the Butler County Treasurer's Office receives a written termination notice.

I understand that changes must be received at least five days before the next scheduled debit. Any changes after that will not be effective until the following month.

Print Name: _____

Signature: _____

Date: _____