



## Contract ACH

## Contract ACH

### Authorization Agreement for Preauthorized Payments

I (We) hereby authorize the Delaware County Treasurer ("Treasurer") to initiate debit entries to my (our) account indicated below and the depository (Financial Institution) named below and to debit the same to such account on a monthly basis for the payment of Delaware County real estate taxes. The date of month for debit entries is set out below. I (We) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Name of Financial Institution \_\_\_\_\_

Routing/ABA# \_\_\_\_\_ Account # \_\_\_\_\_

Type of Account: \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_ Start Date \_\_\_\_\_

Recurring Date Each Month for Debit: \_\_\_\_\_ 1<sup>st</sup> \_\_\_\_\_ 15<sup>th</sup>

Amount of Debit Entry: \$ \_\_\_\_\_

***\*Please include a voided check***

This authority is to remain in full force and effect until **Treasurer** has received written notification from me (or either of us) of its termination in such time and in such manner as to afford **Treasurer** and **Financial Institution** a reasonable opportunity to act on it.

\_\_\_\_\_  
Signature of Taxpayer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Taxpayer

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Parcel Number

\_\_\_\_\_  
Parcel Add. or Road Name (if different)

\_\_\_\_\_  
Treasurer or Deputy

\_\_\_\_\_  
Date

Mail to: Delaware County Treasurer's Office, 145 N. Union Street, Delaware, OH 43015  
or

Email: [treasurer@co.delaware.oh.us](mailto:treasurer@co.delaware.oh.us)