



**CITY OF POMONA PUBLIC WORKS DEPARTMENT**

**505 S. GAREY AVENUE, POMONA, CA 91766**

**Customer Service: (909) 620-2241**

**Pre-Authorized Automatic Utility Bill Payment Application**

Take the worry out of paying your Pomona utility bill by enrolling in our Automatic Utility Bill Payment system. Signing up is easy, just bring the completed, signed application to the City of Pomona Public Works Department and Customer Service will inform you when Automatic Utility Bill Payment will be activated. This takes approximately fifteen (15) business days.

**How do I sign up for Automatic Utility Bill Payment?**

- Simply complete, sign, and return **in person**, this form with a **voided blank check** to Customer Service.
- Please pay your current bill in full with a separate check. Automatic Utility Bill Payment will not be effective until your next billing cycle at the earliest. If your account does not have a zero balance, your first Automatic Utility Bill Payment will be for the entire amount owed.

**Will I still receive a utility bill in the mail?**

- Yes

**What if I do not agree with the amount charged on my utility bill?**

- If for any reason you wish to dispute your bill, you may contact Customer Service **prior** to the bill's due date.

**How do I discontinue participation in this program?**

- Call Customer Service to request that you would like to terminate Automatic Utility Bill Payment. Termination becomes effective within ten (10) business days after receiving your request. Also note that payment of closing statements must be made with cash, check, or online with your bank account or debit/credit card .

**Authorization Agreement for Automatic Utility Bill Payment Processing**

I hereby authorize the City of Pomona and my financial institution to automatically deduct from my checking account indicated below payments for all of my future City of Pomona Utility Services Bills.

I understand that the City of Pomona and my financial institution reserve the right to terminate this authorization and my participation therein. If I choose to terminate this authorization, I will immediately notify the City of Pomona Public Works Department-Customer Service. I understand that authorization will terminate ten (10) business days after I notify the City of my intent to terminate this authorization.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Bank Information (Account Holder)	Please Print
Financial Institution _____	
Branch _____	
Address _____	
City _____ Zip _____	
Branch Routing Number _____	
Bank Account Number _____	

Consumer Information (As it appears on the Pomona utility bill)
Customer/Account Number _____
Account Name _____
Service Address _____
City _____ Zip _____
Mailing Address _____
City _____ State _____ Zip _____

For Office Use Received By: _____ Date: _____ Draw Date: _____
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