



**City of Sugar Hill
Automatic Payment Service (APS)
Authorization Agreement**

Sign up for Automatic Payment Service (APS) and your City of Sugar Hill Natural Gas Utility bill will be automatically paid from your bank account on your bill due date. You will continue to receive your regular billing statement, so there's plenty of time to contact us with any questions before your payment is deducted from your bank account. Call us at (770) 945-6716, or visit www.cityofsugarhill.com, for more information.

NEW APS ENROLLMENT (PLEASE PRINT)

1 - Complete the short application below.

Service Address: <i>(as shown on your bill)</i>	
Name on Gas Utility Account: <i>(as shown on your bill)</i>	
Natural Gas Utility Account Number: <i>(as shown on your bill)</i>	
Contact Phone Number:	

I authorize the City of Sugar Hill to deduct funds from my account on the date my Natural Gas Utility bill is due, at the financial institution listed above, to pay my Sugar Hill gas utility bills. I understand that I can stop these automatic payments if I notify the City of Sugar Hill and/or my financial institution in writing. I also understand that the City of Sugar Hill and/or my financial institution can stop my participation in this service if necessary.

Name as shown on financial institution records

Signature as shown on financial institution record

Date

2- Attach a VOIDED check in the Space below.

Account Type (circle one): Checking or Saving

3 - Mail completed form and VOIDED check to:

City of Sugar Hill, Attn: APS, 5039 West Broad Street, Sugar Hill, GA 30518

4 – Continue to pay your bill until Automatic Payment Service has been started. Allow one full billing cycle.



City of Sugar Hill
Automatic Payment Service (APS)
CHANGE / END/ APS Enrollment
Bank Account Information

END APS ENROLLMENT (PLEASE PRINT)

Please cancel my APS as of _____ (Effective date)

Complete the information below.

Service Address: (as shown on your bill)	
Name on Gas Utility Account: (as shown on your bill)	
Natural Gas Utility Account Number: (as shown on your bill)	
Contact Phone Number:	
Banking Institution and last 4 numbers of your Account Number.	

Signature

Date

****Allow one full billing cycle for cancellation to be processed.**

Change APS Information

Complete the short application below and attach a **VOIDED** check.

Service Address: (as shown on your bill)	
Name on Gas Utility Account: (as shown on your bill)	
Natural Gas Utility Account Number: (as shown on your bill)	
Contact Phone Number:	
Banking Institution and last 4 numbers of your Account number	

I authorized the City of Sugar Hill to deduct funds from my account on the date my Natural Gas Utility bill is due, at the financial institution listed above, to pay my Sugar Hill gas utility bills. I understand that I can stop these automatic payments if I notify the City of Sugar Hill and/or my financial institution in writing. I also understand that the City of Sugar Hill and/or my financial institution can stop my participation in this service if necessary.

Name as shown on financial institution records

Signature as shown on financial institution records

Date

****Allow one full billing cycle for change to be processed.**