



**AUTHORIZATION FOR AUTOMATIC WITHDRAWAL TO PAY MOWER COUNTY PROPERTY TAXES**

Sign up to participate in Mower County's electronic payment plan for real estate taxes. The electronic payment plan is free, dependable, and convenient. To enroll, simply provide the following information:

**Please Note: This electronic payment plan must be in place, or authorization must be returned to our office, no later than TWO WEEKS BEFORE THE DUE DATE.**

(Electronic withdrawal for payment of taxes cannot occur if there are unpaid taxes from prior years on a parcel.)

**Taxpayer Information**

**Parcel Numbers**

Name:	_____	_____ - _____ - _____
Address:	_____	_____ - _____ - _____
	_____	_____ - _____ - _____
Primary Phone:	_____	_____ - _____ - _____
Secondary Phone:	_____	_____ - _____ - _____
Email Address:	_____	

**Note:** If needed, list additional parcel numbers on the back of this form. Your Property Tax Statement is your notification that funds will be electronically withdrawn from your account on the due dates indicated. No other method of notification is used. Please be sure there are sufficient funds in the account on those dates.

**Bank Information**

Name(s) on Bank Account: \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_ Bank Account Number: \_\_\_\_\_

Type of Account \*\*:  Checking  Savings

**\*\* Please include a voided check, or a voided copy of a check, to verify the routing and account numbers and return this form to the address listed above. \*\***

**Note:** If a property owner prepays their property taxes, the automatic withdrawal arrangement is terminated and the property owner will either need to complete and submit a new Authorization for Automatic Withdrawal form to re-instate the automatic payment feature, or pay future taxes due by check or credit card.

I agree that funds will be withdrawn from my account on the two applicable due dates during the year. This agreement remains in place until I notify Mower County in writing to make any changes, such as: termination of authorization, adding or deleting parcels, changes in banking information, etc. I understand failure to have sufficient funds in my account or correct bank information on file may result in termination of the program and I will incur additional penalties and fees. Please make a copy of this completed form for your records.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (Rev. 12/28/2020)