



3100 Belmont Blvd Suite 100 * West Richland, WA 99353 * www.westrichland.org
Utilities & Finance Department * (509) 967-3431 * FAX (509) 967-5706

SMARTPAY AUTHORIZATION / CANCELATION

New Authorization

Update Information

Cancel

Today's Date: _____ Utility Account Number: _____

Customer Name: _____

Service Address: _____

Bank Name: _____

Please select a payment date: 10th 25th

Date SmartPay will begin:

Authorizations received after the 21st of the month will go into effect after the next billing cycle. For example, an authorization received on 6/25 for a payment on the 10th will go into effect on 8/10.

Final bills may be processed through SmartPay unless otherwise requested by the account holder.

Payment may process within a window of 72 hours of the date chosen.

By signing below, I authorize the City of West Richland and the financial institution named to initiate a deduction from my checking account for the purpose of paying my monthly utility bill. This authority will remain in effect until I notify the City **in writing** to **cancel** it in such time as to afford the City and the financial institution **14 business days** to act upon it. I have read and understand the terms of this agreement as stated.

Customer Signature/date

Please send completed and signed form with attached voided check to:

City of West Richland
3100 Belmont Blvd Ste 100
West Richland, WA 99353