



CITY OF MOUNTAIN IRON

"TACONITE CAPITAL OF THE WORLD"

PHONE: 218-748-7570 ■ FAX: 218-748-7573 ■ www.mtniron.com
8586 ENTERPRISE DRIVE SOUTH ■ MOUNTAIN IRON, MN ■ 55768-8260

DIRECT PAYMENT

We are pleased to be able to offer you a new service-the **Direct Payment Plan**.

Now you can have your payment made automatically from your checking or savings account. **And you don't have to change your present banking relationship to take advantage of this service.**

Here's how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be made automatically on the specified day. And proof of payment will appear with your statement.

The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. If the amount of your payment changes, we will notify you at least 10 days before payment date.

The Direct Payment Plan is dependable, flexible, convenient and easy. To take advantage of this service, complete this form and return it to us.

AUTHORIZATION FOR DIRECT PAYMENT

I authorize the City of Mountain Iron and the financial institution named below to initiate entries to my checking/savings account. This authority will remain in effect until I notify you in writing to cancel it in such time as to afford the financial institution a reasonable opportunity to act on it. I can stop payment of any entry by notifying my financial institution 3 days before my account is charged.

(NAME OF FINANCIAL INSTITUTION)

(CITY)

(STATE)

(ZIP CODE)

(SIGNATURE)

(DATE)

(NAME-PLEASE PRINT)

(ADDRESS-PLEASE PRINT)

ACCOUNT NUMBER _____ CHECKING _____ OR SAVINGS _____

FINANCIAL INSTITUTION ROUTING NUMBER _____
(ON THE BOTTOM LEFT OF YOUR CHECK)

RETAIN FOR YOUR RECORDS

On _____ I authorized the City of Mountain Iron Public Utilities
(DATE) (COMPANY NAME & DEPARTMENT)

ADDRESS : 8586 Enterprise Dr S, Mountain Iron MN 55768

PHONE : (218) 748-7570

To initiate electronic entries to my checking/savings account and have agreed to the terms listed on the authorization. I may revoke authorization with the company at any time by writing to the address above.

Initial payment amount \$ _____

Regular payment date _____