



City of Clear Lake
Utility Billing Dept.

PO BOX 185
15 N 6TH ST
CLEAR LAKE, IA 50428

CITYOFCLEARLAKE.COM

641-357-5267

641-357-8711 (fax)

**ONLINE BILL
VIEWING 24/7....
CITYOFCLEARLAKE.COM**

Utility Billing Autopay Plan

SAVE TIME, POSTAGE, AND AVOID LATE FEES...

Your payments will be automatically withdrawn from your checking or savings account. It saves you time, effort, and postage. Plus, you can rest easier knowing your payments are always on time.

You will continue to receive your monthly bill. The amount of your bill will be withdrawn from your checking or savings account on the 15th of the month (or next business day if 15th falls on a holiday or weekend).

This service is free of charge. You may stop participation at any time by notifying the City of Clear Lake by the 10th of the month. If you move, your final bill will be automatically deducted from your bank account, unless otherwise instructed. If you move to another location in Clear Lake, you will need to sign up again to authorize automatic withdrawal from your bank account for the new service location. You will be charged a \$25 fee for any returned automatic payment.

CONVENIENT
PAYMENT
OPTIONS...

FREE SERVICE (Complete form below and return with Voided Check)

- ▶ **Deduct from Checking/Savings on 15th of each month (or next business day if 15th falls on weekend or holiday)**

OTHER PAYMENT OPTIONS (Available at cityofclearlake.com or 877-885-7968. Convenience Fees Apply)

- ▶ **Set up Recurring Monthly Payment via MasterCard, Visa, Discover or Checking/Savings Account.**
You pick a date after the 10th of the month. Please Note: Payments after 15th will include applicable late fees.
- ▶ **Make a One-Time Payment via MasterCard, Visa, Discover or Checking/Savings Account.**

CUSTOMER NAME _____

SERVICE ADDRESS _____ UTILITY ACCOUNT # _____

PHONE (HOME) _____ PHONE (CELL) _____

EMAIL ADDRESS _____

PLEASE SELECT ONE

I/We authorize the City of Clear Lake to initiate various debit entries to my/our checking/savings account. This authority will remain in full effect until I/we notify the City of Clear Lake of its termination.

Signature _____ Date _____

ATTACH A CHECK MARKED "VOID"