



PROUDLY SERVING OUR COMMUNITY SINCE 1869

Canton City Utilities
306 2nd ST SE
Canton OH 44702
Phone: 330-649-8100
cantonutilities@cantonohio.gov
www.cantonutilities.com

AUTOMATIC PAYMENT FORM

Please complete and return as requested. Once auto pay is in effect, the words **BANK DEDUCTION** will be displayed under *Please Pay This Amount* at the top/right of the invoice. The transfer of funds for the amount due for utilities will take place on or about the due date noted on the bill.

Water Account Number: _____

Account Name: _____

Service Address: _____

Daytime phone number _____

Financial Institution _____

Routing number _____

Checking Account number _____

- **Please enclose/attach a copy of any canceled or voided check (a copy of the check can be voided to not waste the actual check). If you do not have checks, please ask your financial institution for a document which lists your routing and account numbers.**

Please sign your name as it is listed on your account

Signature: _____ Date: _____
(ORIGINAL SIGNATURE REQUIRED -NO DIGITAL)

Print Name: _____

****Return form to Canton City Utilities, 306 2nd ST SE, Canton OH 44702
or, email to cantonutilities@cantonohio.gov**