



GRAND HAVEN CHARTER TOWNSHIP

~ DIRECT PAYMENT PROGRAM APPLICATION ~

Water/Sewer Bill

Tax Payments*

Customer Name (Please Print): _____ Email: _____

Service Address: _____

Water/Sewer Account # (i.e. WREN-012345-0000-01): _____ Tax Parcel Number (i.e. 70-03-12-345-890): _____

Mailing Address (if different): _____

City: _____ State: _____ Zip Code: _____ Current Phone #: _____

*Tax Payments: Do you want your Winter Taxes taken out on December 31? YES NO (payment will come out on Feb. 14)

Please deduct my automatic bill payment from my: _____

Name of Bank, Credit Union or Savings & Loan: _____

Type of Bank Account: Checking Savings Bank Account #: _____

Bank Routing Number (9-digit number in bottom left hand corner of your check): _____ Bank Phone: _____

I authorize Grand Haven Charter Township to deduct my Water/Sewer Bill and/or Tax Payment from the checking or savings account listed above. I understand that I control my payments, and if at any time I decide to discontinue this payment service, I will notify Grand Haven Charter Township.

Applicant's Signature: _____ Date: _____

**Be sure to enclose a voided check with this application.
Please return completed form to:**



Bank Routing Number Checking Account Number Check Number

Auto Payment Program
Grand Haven Charter Township
13300 168th Avenue
Grand Haven, MI 49417
616-842-5988

~ ATTENTION ~
On May 22, 2013, the township instituted a NSF Check Policy. There will be a \$25 fee charged for every NSF (non-sufficient funds) check or ACH (bank) payment check that we receive. The full Township policy can be viewed upon request.