



**AUTOMATIC PAYMENT  
AUTHORIZATION AGREEMENT**

**Monthly Parking Fee: \$200.00**

**11930 Cyrus Way, Mukilteo, WA 98275  
Phone: 425.263.8000 Fax: 425.290.1009**

**Upon approval, your monthly parking payments will be charged directly to your checking account or major credit card. Deductions will occur on the 15th of every month. If the 15th falls on a weekend or holiday, payments will be deducted on the following business day. Your total charges will appear on your monthly bank or credit card statement.**

I hereby authorize the City of Mukilteo to initiate debit entries to the account I have specified on the form below for the amount of my monthly parking permit fee. Payments that are denied or returned for non-sufficient funds are subject to a \$35 fee. This authority will remain in effect until I notify the City of Mukilteo, in writing, at least two weeks prior to the next regularly scheduled payment date. If I change the account number or financial institution specified, I will provide written authorization for the change to the City of Mukilteo. In addition, I have the right to stop payment of the charge by notifying my financial institution before the account is charged. I understand that both the financial institution and the City of Mukilteo reserve the right to terminate the payment plan and/or my participation therein.

**I authorize the City of Mukilteo to keep my signature on file AND to charge my (Please Check One)**

<input type="checkbox"/>	<b>CHECKING ACCOUNT - A VOIDED CHECK MUST BE ATTACHED</b>		
	Checking Account#:	Bank ABA/Routing#:	
	Bank Name:		
<input type="checkbox"/>	<b>CREDIT CARD (check appropriate card):</b>	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard
	Credit Card Number:	Expiration Date:	

Customer Name, as it appears on your bank or credit card statement:		Telephone Number with Area Code:	
Address, as it appears on your statement:	City:	State:	Zip code:
Email Address (for payment notifications)			

\_\_\_\_\_  
**SIGNATURE – I agree to the terms as stated above**

\_\_\_\_\_  
**DATE**

*We value you as a customer and respect the security of your personal information. The information collected here will be used for accounting purposes only. Confidentiality of personal information is important and any information you provide to us will be kept in a secure vault. Access to your information will be limited to our employees in the performance of their job and persons authorized by law.*