Maroney's Sanitation Incorporated
Stillwater, Minnesota

Automatic Payment of Service Account

Maroney's Sanitation Inc. offers convenient automatic bill payment. This form serves as the instructions and authorization for Maroney's Sanitation Inc. to institute this service for your account with us.

I (we) _____ (print your name) hereby authorize Maroney's Sanitation Inc. to charge my account by the amount of any outstanding invoices on my account. I **will continue to receive bills** as I have in the past. I understand that on the 15th working day of each month, my account will be charged by the amount of any open invoices. To cancel, I (we) must notify Maroney's Sanitation Inc. of my wishes far enough in advance to give Maroney's Sanitation Inc. a reasonable opportunity to act.

Print your name: _____ Address: _____

Sign your name: _____ Date: _____/_____/_____

You can select from either #1 – Payment through your bank, or #2 – Payment on a Credit Card. **Please select only 1 of the 2 payment options.**

Option #1 – Payment through a Banking Account:

****PLEASE SEND A VOIDED CHECK.**

Name of Bank: _____

Bank Routing #: _____

Bank Account #: _____

Check one type of account you want the payment to be made from:

☐ Checking ☐ Savings

Option #2 – Payment using a Credit Card:

Card holders name:_____
Card billing address:_____
Card billing city:_____
Card billing state:_____ Card billing zip:_____

Card Type:

☐ **Visa** ☐ **MasterCard** ☐ **Discover** ☐ **American Express**

Card number: _____

Expiration Date: _____/_____/_____

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