



City of Loma Linda

25541 Barton Road, Loma Linda, California 92354-3160 • (909) 799-2800 • FAX (909) 799-2890

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Sign me up for City of Loma Linda's AutoPay Program! Application Agreement

Name *(please print name as it appears on your City of Loma Linda bill)*

Service Address *(please print)*

City State Zip

Telephone number *(daytime)*

Your City of Loma Linda 9-Digit Account # *(as it appears on your bill)*

E-mail address *(to receive notification of billing)*

Financial Institution *(please print)*

Routing and transit number, plus account number
(all the numbers at the bottom of your check)

ACCOUNT TYPE (PLEASE CHECK ONE):

CHECKING ACCOUNT

SAVINGS ACCOUNT

I hereby authorize the City of Loma Linda and the financial institution I've indicated to automatically deduct from my checking account all future payments for my City utility bills. I understand that both the City of Loma Linda and my financial institution reserve the right to terminate this authorization and my participation therein. If I choose to terminate this authorization I will immediately notify the City of Loma Linda.

Print Name

Signature & Date *(Must match name on check)*

Please mail: 1. Voided check & 2. Completed Application Agreement
(your application will not be processed without all required documents)

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Attn: Finance Department, Utility Services