



**APPLICATION  
CITY OF PINELLAS PARK  
AUTOMATIC BILL PAYMENT SERVICE**

**Section 1**

City Utility Account #: \_\_\_\_\_

Name on Utility Bill: \_\_\_\_\_

Service Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Phone number where you can be reached during business hours: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Account to be Charged:           Checking                   Savings

Bank Account Number: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

**For a checking account, please enclose a blank check marked VOID. For a savings account, please enclose a deposit slip marked VOID. Be sure the ABA routing number is included. Contact your financial institution if the routing number is not on the slip. This service is only available through US Banks.**

I have included a voided check or savings slip and hereby authorize my financial institution to debit my account in the name of the City of Pinellas Park.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Section 2**

If you prefer not to include a voided check or deposit slip, complete the top section of this form and then take it to your bank and have them complete the information below. Return this form to the City of Pinellas Park by mail, fax, or email.

**FOR BANK USE ONLY**

Financial Institution: \_\_\_\_\_

Branch: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Bank Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please return completed form to the City of Pinellas Park Utility Billing Division at:  
[www.pinellas-park.com/CustomerService](http://www.pinellas-park.com/CustomerService) or [utilitybilling@pinellas-park.com](mailto:utilitybilling@pinellas-park.com).