

**Authorization Agreement for ACH Direct Withdrawals
For quarterly property tax payments**

Company Name: Village of Ridgewood **Date:** _____

Check One:

New Authorization Authorization to Transfer to Another Depository
 Change of Account Number Cancellation

I (we) hereby authorize the Village of Ridgewood, hereafter called COMPANY, to initiate debit entries to my (our) checking account indicated below and I hereby authorize the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

Depository Name _____

Branch _____

City _____ **State** _____ **Zip** _____

Transit/ABA No. _____ **Account No.** _____

This authority is to remain in full force and effect until COMPANY has received written notification from me of its termination in such time and in such manner as to afford the COMPANY and the DEPOSITORY a reasonable opportunity to act on it and in no event shall a termination notice be effective with respect to entries processed by the COMPANY or the DEPOSITORY prior to its receipt.
The bank or financial depository information provided in this form by the taxpayer shall remain confidential from all other sources and used solely for the purposes described in this form.

*******PLEASE TYPE OR PRINT CLEARLY*******

Name(s) _____

Property Location _____

Mailing Address (if different from above) _____

Day Time Telephone _____ **Block & Lot** _____

E-Mail Address _____

Signature _____ **Signature** _____

***NEW ENROLLMENTS & CHANGES MUST BE RECEIVED AT LEAST
2 WEEKS PRIOR TO PAYMENT DUE DATES
ATTACH YOUR PERSONALIZED VOIDED CHECK HERE
RETURN TO THE VILLAGE OF RIDGEWOOD
TAX COLLECTORS OFFICE
131 N. MAPLE AVE., RIDGEWOOD NJ 07450
201-670-5500 EXT 511***