

Office Use Only:	Date Received: _____
Lot#: _____	Date Entered: _____

**LEXINGTON MUNICIPAL MOBILE HOME PARK  
AUTHORIZATION & ENROLLMENT FORM FOR AUTOPAY  
AUTOMATIC FUNDS TRANSFER  
FOR RENTAL/WATER/SEWER/GARBAGE PAYMENTS**

Tenant Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State \_\_\_\_\_ ZIP \_\_\_\_\_

Service Address: 5203 MAIN STREET, LOT # \_\_\_\_\_

I hereby authorize the Village of Lexington to automatically withdraw from my account identified below the total amount due on my account. I authorize the Financial Institution named below to accept such transactions initiated by the Village of Lexington. The withdrawals shall be made from my account on (or approximately 3 days before or after) the due date of each month. This authorization is to remain in effect until the Village of Lexington has received written notification from me (or either of us) of termination at least five days before the next regular billing date.

Financial Institution Name \_\_\_\_\_

Account # \_\_\_\_\_ Checking \_\_\_\_\_ Savings \_\_\_\_\_

BANK ABA/Transit# \_\_\_\_\_  
(first nine numbers on the bottom encoded line of the check for withdrawal slip)

Print Name \_\_\_\_\_ Date \_\_\_\_\_

**\*Signature** \_\_\_\_\_

Second Signature on Account (if applicable) \_\_\_\_\_

Attach a voided Check or Saving Withdrawal Slip to form and return to:

VILLAGE OF LEXINGTON  
ATTN:  
7227 HURON AVENUE, SUITE 100  
LEXINGTON MI 48450

*Email* \_\_\_\_\_