



City of Boulder City
401 California Ave
Boulder City, NV 89005

AUTOMATIC PAYMENT PLAN APPLICATION

(This form is not for Utility Bills)

Customer name (as shown on invoice/bill): _____

Customer # _____

Contact phone: _____

Email address: _____

New Enrollment / sign-up

Change bank information

Cancel automatic payments

Bank Name _____

Transit Routing _____ Bank Account # _____

Please include a copy of a voided check with your application.

I hereby authorize City of Boulder City and the financial institution designated on this application to charge/cancel the account I have specified for payment of my utility bill. I have the right to cancel the plan by notifying the City of Boulder City within five days after I receive my bill. If a payment is returned for insufficient funds, I will be charged a return item fee and I may be excluded from the plan. In addition, I understand that both the financial institution and the City of Boulder City reserve the right to terminate this payment plan and/or participation therein.

Signature: _____ Date: _____

Return applications:

Mail:
City of Boulder City
Finance Office
401 California Ave
Boulder City NV 89005

Email:
AReivable@bcnv.org

Drop box:
City Hall
parking lot median
or
rear of building by utility billing window