



Village of Archbold

300 N. Defiance Street, PO Box 406, Archbold, OH 43502 | (419) 445-4726

You do not need to complete both forms, however it is recommended.

Authorization to Email Water Bill

I hereby authorize the Village of Archbold to email my monthly water bill to the email address listed below. I also agree that I will no longer receive a bill in the mail delivered by the US Postal Service, and email will be the only way I receive my bill.

Name _____ Water Acct# _____
Billing Address _____ Phone/Cell# _____
Email Address (Please Print) _____
Signature _____ Date _____

Authorization to Charge Bank Account

I hereby authorize the Village of Archbold to deduct my monthly water bill from my checking or savings account. I understand if the ACH payment is returned a \$25.00 fee will be added to my water account.

Billing Address _____ Water Acct# _____
Phone/Cell# _____
Bank Routing# _____ Bank Account # _____
Please circle one Checking or Savings
Signature _____ Date _____