

Authorization to automatically withdraw funds to pay real estate taxes.

COMPLETE ONLY IF YOU ARE A NEW PARTICIPANT OR HAVE A CHANGE

Name: _____ Phone#: _____

Address: _____ PIN#: _____
(Parcel Identification Number)

Bank Name: _____ Routing#: _____

Type of Acct: _____ checking _____ savings Acct# _____

Email _____

Choose One

- Total Tax Bill withdrawn on 1st Installment due date New Request
 1st and 2nd Installments withdrawn on each due date Change

I authorize the Champaign County Treasurer to withdraw funds according to my selection above. This authorization will remain in effect until revoked, or a payment is made outside of this program. I understand that if the above information is not correct and the withdrawal cannot be processed, I am responsible for any late fees incurred.

Signature _____ Date _____

This form must be received 10 days before the 1st installment due date

Champaign County Treasurer, 1776 East Washington, Urbana, IL 61802-4581