

Onondaga County  
Department of Finance  
Civic Center 15<sup>th</sup> Floor  
421 Montgomery St  
Syracuse, NY 13202

Authorization Agreement for Direct Payments of Real Property Taxes (ACH Debits)

I (we) hereby authorize Onondaga County Department of Finance, hereinafter called the "County" to initiate debit entries into my (our) ( ) checking, ( ) savings or ( ) money market account indicated below, from the depository financial institution named below, hereinafter called the "Depository", and to debit the same such account for the payment of property taxes on my property indicated below, on the ( ) 15<sup>th</sup> or ( ) 25<sup>th</sup> (or next business day) every month for a period of 24 months beginning \_\_\_\_\_ 20\_\_\_\_  
And ending \_\_\_\_\_20\_\_\_\_\_.

Depository Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Account Number: \_\_\_\_\_ Please attach a voided check.

Routing Number: \_\_\_\_\_

This authorization is to remain in full force and effect for 24 months or until the "County" has received written notification from me (us) of its termination in such time and in such manner as to afford the "County" and "Depository" a reasonable opportunity to act on it.

Should collected funds not be available in the designated account on the due date listed above, no notice will be given and it will be the responsibility of the property owner to insure payment in a timely fashion so as not to incur interest/penalty charges.

Name(s): \_\_\_\_\_ Date: \_\_\_\_\_

Signature(s): \_\_\_\_\_  
\_\_\_\_\_

Town: \_\_\_\_\_ Tax Map # \_\_\_\_\_ Monthly  
Amount: \_\_\_\_\_