



AUTOMATIC BANK DRAFT AUTHORIZATION PREPAYMENT FORM

I authorize Hamilton County Trustee's Office to draft my account specified below for payment of property taxes for the following map parcel number: _____ (Map# from tax bill). You are authorizing Hamilton County Trustee's Office to debit your checking/savings account through ACH beginning on the 5th day of _____, _____ for _____ equal payments (last payment February 5th). If this date falls on a weekend, your account would be debited on the next business day. To cancel the automatic draft or make changes we must be notified in writing 30 days prior to the withdrawal date. Signing this form verifies you understand that failure to have sufficient funds on the day of the debit or failure to notify Hamilton County Trustee's Office of a bank or account change will result in a \$30 NSF fee and removal from the program. Prepayment ACH will be effective March through February. Be advised the last payment may be adjusted up or down to pay the balance in full. The monthly amount is based on the previous year's tax amount.

For more information contact Hamilton County Trustee's Office at 423-209-7270 or visit our website <http://www.hamiltontn.gov/trustee>.

Return completed original form (*with required attachments) in person or by mail to:
Hamilton County Trustee's Office
625 Georgia Avenue, Suite 210
Chattanooga, TN 37402

| |
|----------------------------|
| For Office Use Only |
| Clerk Initials: _____ |
| Date: _____ |

All information must be completed

Owner's Name: _____

Mailing Address: _____ Phone: _____
Street

City, State, Sip _____ Email: _____

Property Address: _____

Bank Information

Name(s) on Bank Account: _____

Bank Name: _____

Bank Address _____

Only check one box:

Checking (a voided check [not a deposit ticket] is required to verify the routing and account number) *

Savings (documentation from your bank is required to verify the routing and account number) *

Routing Number

Account Number

Signature _____ Date _____

| |
|---------------------------|
| No. of payments: _____ |
| Installment Amt: \$ _____ |

This program is **only** available to taxpayers who are not currently escrowing their property tax and is **only** for the current year taxes.