



City of South Haven Property Taxes Authorization for Automatic Payment

2017 Tax Season

Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Property Tax ID Number(s): _____

I authorize the City of South Haven to withdraw the following property taxes for the 2017 tax year from the following bank account. You must check a box to select a withdraw date for each tax season to be processed. If payment is returned to the City for any reason there will be a \$25.00 returned payment fee.

Summer Tax Options (Choose One)

Winter Tax Options (Choose One)

Withdraw Date: September 19, 2017

Withdraw Date: December 29, 2017

Withdraw Date: February 14, 2018

**Authorization form must be completed and returned at least 5 business days before the withdraw date.

Bank Account Information:

Routing #: _____

Bank Account #: _____

Bank Name: _____

Account Type: Checking Savings

Signature

Date

To ensure accurate processing please attach voided check or a copy of a bank statement

Return completed form to:
By Mail: City of South Haven, 539 Phoenix Street, South Haven, MI 49090
By Fax: (269) 637-5319 By Email: amorgan@south-haven.com
Call (269) 637-0706 if you have any questions.