

# THE TOWNSHIP OF OCEAN

MONMOUTH COUNTY

399 MONMOUTH ROAD  
OAKHURST, NJ 07755-1589

<b>Return By:</b>	<b>For Payment On:</b>
January 20 <sup>th</sup>	February 5 <sup>th</sup>
April 20 <sup>th</sup>	May 5 <sup>th</sup>
July 20 <sup>th</sup>	August 5 <sup>th</sup>
October 20 <sup>th</sup>	November 5 <sup>th</sup>



OFFICE OF THE TAX COLLECTOR  
(732) 531-5000

## DIRECT ACCOUNT DEBIT AUTHORIZATION FOR AUTOMATIC QUARTERLY TAX AND/OR SEWER PAYMENTS

TAX/SEWER ACCOUNT INFORMATION		
Name:		
Property Address:		
Block	Lot	Qualifier
Sewer Account Number:		
Mailing Address: Street:		
City	State	Zip Code
Day Time Phone Number:		

BANKING ACCOUNT INFORMATION		
Routing (ABA) Number:		
Bank Account Number:		
Bank Account Type	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
For account verification purposes, kindly attach a voided check. To Direct Debit from a savings account, attach a note from your bank listing the account and routing (ABA) numbers.		

DIRECT DEBIT AUTHORIZATION			
I hereby authorize the Township of Ocean to debit my checking or savings account each quarter (February, May, August, and November) for the Municipal Charges I have indicated below.			
I understand that these charges will continue being deducted automatically from my checking or savings account until I make written request for the Township of Ocean to discontinue direct debit of my account.			
<input type="checkbox"/> Municipal taxes	<input type="checkbox"/> Sewer Utility Charges	<input type="checkbox"/> Both Tax and Sewer	
<input type="checkbox"/> Please notify me by e-mail prior to processing my direct debit.	e-mail address:		
Signature:		Date:	
Print Name:			

**FOR NEW ENROLLMENTS OR CHANGES IN EXISTING ENROLLMENTS ONLY!**

Complete this form and mail to the above address. Your account will be pre-noted to verify account accuracy prior to the first actual debit to your account for municipal charges.