

**City of Tallahassee**  
**Your Own Utilities<sup>SM</sup>**

Please fill out the form below and forward it to the REVENUE DIVISION with a voided check or bank letter confirming your account and routing numbers to us via:

Mail: City of Tallahassee Revenue Division  
Office of the Treasurer Clerk  
300 S. Adams Street A-4  
Tallahassee, Florida 32301-1731

Hand Deliver: Open Monday-Friday, 8:00 a.m. – 5:30 p.m.  
City of Tallahassee Revenue Office  
Renaissance Building  
435 N. Macomb Street, 1<sup>st</sup> Floor  
Tallahassee, Florida 32301

Fax: (850) 891-6484

Email: [Revenue@talgov.com](mailto:Revenue@talgov.com) (Please include Bank draft in the subject field.)

**AUTHORIZATION TO PAY CITY OF TALLAHASSEE UTILITY BILLS THROUGH THE  
AUTOMATIC PAYMENT PROGRAM**

Name: \_\_\_\_\_  
(As it appears on your utility bill-please print or type if using a computer)

Service Address: \_\_\_\_\_

Utility Account Number: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name of Financial Institution: \_\_\_\_\_

I authorize the above named financial institution to charge my checking account the amount of any City of Tallahassee utility bill and to make the deduction payable to the order of the City of Tallahassee. In making this authorization, I agree that each payment shall be the same as if it were an instrument personally signed by me. This authority is to remain in effect until revoked by me in writing. In addition, I have the right to stop payment of a charge by timely notification to my financial institution prior to charging my account. I also understand that both the financial institution and the City of Tallahassee reserve the right to terminate this payment plan (or my participation within the program).

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

To cancel the automatic draft payment process, please provide written request via email, fax, USPS mail or in person at the above referenced locations. Please call the Revenue Division with any questions at (850) 891-6494.