



## **TOWN of MIDDLETOWN RI TAX COLLECTION Automatic Bank Account (ACH) Withdrawal Policy Effective June 1, 2020**

The Town of Middletown, RI now accepts ACH electronic payments for payment of taxes, sewer fees, and assessments for Water and Sewer improvements

- The taxpayer authorizes payment of taxes by completing the “Authorization Agreement for Preauthorized Payments” and returning the completed form with documentation to the Tax Collections department
- Your account must be current, delinquent accounts are not eligible.
- There are several options for payment of taxes; please elect only one on the form. The following indicates when a payment will be deducted from your designated account
  - **Annually**                      The 10<sup>th</sup> of September
  - **Quarterly**                     The installment due date indicated on the payment stubs
  - **Monthly**                        Your tax bill will be divided into twelve equal installments.  
    Payments will be debited the 10<sup>th</sup> of each month.  
    First payment July 10<sup>th</sup>, last payment the following June 10<sup>th</sup>

### **ALL PAYMENTS WILL BE WITHDRAWN AS OF THE 10<sup>TH</sup> OF THE MONTH OR THE NEXT BUSINESS DAY FOLLOWING**

- The automatic withdrawals will be processed as “Middletown Property Tax”
- The authorized bank must be a US based bank. Foreign bank accounts are not permitted.
- The Town will attempt to send you an e-mail reminder of the ACH within the week prior to the 10<sup>th</sup>. It is your responsibility to make sure funds for taxes are available
- Commercial business accounts, please indicate title or position of employee authorizing ACH.
- If you begin the ACH payment process during the tax year, your payment options will be discussed with you.
- If the ACH withdrawal cannot be processed by the bank, you will be contacted via mail by the Town and advised of the remaining amount due plus any interest, penalties and fees due to the Town of Middletown. The ACH payment process may be terminated at the Collections office discretion.
- It is the **taxpayer’s responsibility** to notify the Tax Collections office of **any changes** in tax-payer’s banking or contact information or if the property has been sold or disposed of in the course of the tax year.
- If you have any questions or need additional information regarding this policy you may reach out to the Tax Collections office at 401.847.0193 or the Finance office at 401.846.4478.



TOWN OF MIDDLETOWN  
 350 EAST MAIN ROAD • MIDDLETOWN, RHODE ISLAND 02842

**OFFICE OF THE FINANCE DIRECTOR AND TAX COLLECTOR**

Office: (401) 846-4478 • Fax: (401) 849-6267

**OFFICE OF THE TAX ASSESSOR**

Office: (401) 846-0193 • Fax: (401) 845-0413

**MIDDLETOWN TAX PAYMENTS AUTOMATIC ACCOUNT WITHDRAWAL FORM**

**AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS (ACH DEBITS)**

I (we) hereby authorize the Town of Middletown to initiate debit entries to my (our) Checking ( ) Savings ( ) account indicated below at the depository named below, hereinafter called DEPOSITORY, to debit the same to such account. These debit entries will occur as indicated:

**Elect Payment Option Below:**

- ANNUALLY \_\_\_\_\_ Payment on first due date of September 10th  
 QUARTERLY \_\_\_\_\_ The installment due dates on the bill  
 MONTHLY \_\_\_\_\_ 12 equal installments, 10<sup>th</sup> of each month  
 OTHER \_\_\_\_\_ June 10, 2020 only

**Tax Accounts to be Paid via ACH**

- Motor Vehicle \_\_\_\_\_ Account # M- \_\_\_\_\_  
 Real Estate \_\_\_\_\_ Account # R- \_\_\_\_\_  
 Real Estate \_\_\_\_\_ Account # R - \_\_\_\_\_  
 Sewer \_\_\_\_\_ Account # S - \_\_\_\_\_  
 Water \_\_\_\_\_ Account # W - \_\_\_\_\_  
 Tangible \_\_\_\_\_ Account # T- \_\_\_\_\_

DEPOSITORY NAME: \_\_\_\_\_ BRANCH: \_\_\_\_\_  
 ROUTING \_\_\_\_\_ BANK ACCOUNT \_\_\_\_\_  
 NUMBER: \_\_\_\_\_ NUMBER: \_\_\_\_\_

**PLEASE PRINT LEGIBLY**

This authorization is to remain in full force and effect until the Town of Middletown has received written notice from me (or either of us) of its termination in such time and in such manner as to afford the Town of Middletown and DEPOSITORY a reasonable opportunity to act on it. I/We acknowledge the attached ACH policy and its terms and conditions.

NAME(S): \_\_\_\_\_ SIGNATURE(S): \_\_\_\_\_  
 Business: \_\_\_\_\_ Position: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Phone: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_ E-Mail alternate: \_\_\_\_\_

Date \_\_\_\_\_ Received Tax \_\_\_\_\_  
 Signed: \_\_\_\_\_ Collections: \_\_\_\_\_ Date \_\_\_\_\_ TC \_\_\_\_\_

**REQUIRED – ATTACH A VOIDED CHECK and or ROUTING NUMBER and BANK ACCOUNT VERIFICATION**