

The Tax Collection Office offers Direct Withdrawal from you checking, Savings, or Money Market account. Payments will be deducted on a quarterly basis. Please complete the application below and return it to:

Tax Collector  
Township of Hazlet  
1766 Union Avenue  
Hazlet, NJ 07730

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Authorization Agreement for Pre-Authorized Payments  
through the Automated Clearing House (ACH).

I (we) authorize the Township of Hazlet to initiate debit entries to my (our) checking or savings account (as indicated below) and the depository named below, hereinafter called Depositor, to debit the same account.

Depository Name \_\_\_\_\_ Branch \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Transit/ABA # \_\_\_\_\_ Account # \_\_\_\_\_

Account Type **Checking** \_\_\_\_\_ **Savings** \_\_\_\_\_

This Authorization is to remain in full force and effect until the Township of Hazlet and the Depository have received written notification from me (us) of it's termination in such time and in such manner as to afford the Township of Hazlet and Depository a reasonable opportunity to act on it.

Name(s) \_\_\_\_\_ Block/Lot \_\_\_\_\_

Address of Property \_\_\_\_\_ Telephone# \_\_\_\_\_

Signature \_\_\_\_\_ Signature \_\_\_\_\_

Please attach your voided check or printed, bank generated, account and routing information for verification. Funds must be made available on the 6<sup>th</sup> day of February, May, August, and November. Quarterly bill amounts may be obtained from your Tax Bill. A \$20.00 fee will be charged if funds are not available.

For questions please call 732-217-8643 or send an email to [jfeirstein@hazletwp.org](mailto:jfeirstein@hazletwp.org)