

AUTHORIZATION AGREEMENT FOR TWICE YEARLY AUTOMATIC DEBIT

I hereby authorize the Kitsap County Treasurer to debit my checking account identified below for payment of property taxes on April 30th and October 31st each year. If the due date falls on a weekend the payment will occur on the following business day. This authorization will remain in full force until a written notification from me of its termination. All changes to this agreement must be submitted in writing.

Name: _____ Phone: _____

Address: _____ Email: _____

City: _____ State: _____ Zip Code: _____

Bank Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Checking Account No: _____

Name tax account is under: _____

Tax parcel identification number(s): _____

Signed: _____ Date: _____

Attach a voided check from your bank (NO deposit slips) If you have any questions, please call (360) 337-4939 or email TreasurerAutoPay@kitsap.gov. Return this form to the Treasurer's office by April 1st to begin with the first half payment or by October 1st to begin with the 2nd half payment.

Mail to:
Kitsap County Treasurer
614 Division Street MS-32
Port Orchard, WA 98366-4614