ACH Enrollment - *Authorization for Direct Payment of Property Taxes*

Sign up today to participate in Le Sueur County's Direct Payment Plan for Real Estate Taxes. The direct payment plan is free, dependable and convenient. To take advantage of this service you simply need to fill out the authorization form below.

After you enroll, your checking or savings account is automatically debited the amount of your tax payment. The debit would take place on May 15, October 15, or November 15. If this date falls on a weekend, your account would be debited on the next business day. You will stay in the program until you notify the Le Sueur County Treasurer that you wish to withdraw or if the property ownership changes. **You may enroll at any time, but it is requested that you sign up at least 3 weeks prior to a payment date.**

Return completed form to: Le Sueur County Treasurer
88 S. Park Ave., Le Center MN 56057
For more information, contact the Le Sueur County Treasurer at 507-357-8219.

Property Information:

Taxpayer Name(s):_____

Parcel Number _ _-_ _ _-_ _ _ _ (located at top of your tax statement)

Parcel Number _ _-_ _ _-_ _ _ _

Parcel Number _ _-_ _ _-_ _ _ _

Parcel Number _ _-_ _ _-_ _ _ _

Parcel Number _ _-_ _ _-_ _ _ _

Parcel Number _ _-_ _ _-_ _ _ _

Taxpayer's Mailing Address:_____(Street Address)
(City)_____(State)_____(Zip)_____

Daytime Phone Number ( ) _____ - _____

Email: _____

Account Information:

Name on Bank Account _____

Bank Name _____

Bank Address _____

Bank Routing # _____Account # _____

Type of Account: Checking *or* Savings

Your bank can help you with the routing and account numbers.

****Include a voided check to verify the routing and account number.**

Requested Start Date: ☐ 1st Half Taxes ☐ 2nd Half Taxes Year: _____

I hereby authorize the Le Sueur County Treasurer to automatically withdraw from the above named account twice annually to make payment for my property taxes. Authorization will remain in effect until I notify the Le Sueur County Treasurer in writing that I wish to change, add or delete parcels. I understand failure to have sufficient funds on date of debit will result in inability to remain in the program. I also agree to notify Le Sueur County Treasurer at least three weeks prior to debit date to request a change in plan participation. The Non-Consumer Receiver agrees to be bound by the Nacha Operating Rules and Guidelines.

Signature _____Date_____