## **CITY OF COOPERSVILLE**

289 Danforth Street Coopersville MI 49404-1204 Telephone: (616) 997-9731 • Facsimile: (616) 997-6679 www.cityofcoopersville.com



## **AUTHORIZATION FOR PAPERLESS UTILITY BILL**

Utility Billing Acct #				
Property Address			<del></del>	
I hereby authorize the City of Coopersville to email my bi-monthly utility bill to the email address indicated below. I understand that the bi-monthly utility bill is the only statement that will be emailed and that I will no longer receive a printed utility bill. I will notify the City of Coopersville if my email address changes or if I wish to receive a printed utility bill again. Further, I understand that failure to receive the electronic bill does not waive past due penalties.				
Such emails will be sent from the billing@cityofcoopersville.com account. If you do not receive the electronic bill, please check your spam/junk folder or contact City Hall at 616-997-2114. Bills will be emailed around the 7 <sup>th</sup> of the following months: January, March, May, July, September & November.				
This authorization will remain in effect until written notice of termination is given to the City of Coopersville. I acknowledge receipt of a signed copy of this Authorization.				
Name of Authorizing Party	Address	City	State	Zip
Email Address		Phone Numb	er	
Signature of Authorizing Party		Date		
FOR OFFICE USE ONLY:				
Date Received:		Date of Termination:		

HOME://WATER/FORMS/Paperlessutilitybill