GRAYS HARBOR COUNTY TREASURER
AUTOPAY ENROLLMENT

Form must be completely filled out and postmarked by March1st for 1st half taxes or September 15th for 2nd half taxes.

AUTHORIZATION FOR DIRECT DEBIT OF PROPERTY TAX PAYMENT

I hereby authorize the Grays Harbor County Treasurer, and the U.S. financial institution named below, to withdraw from my account listed below and to release the account information herein. The withdrawals shall be made from my account on April 30 (for full or 1st half payment) and October 31 (for 2nd half payment), or on the next business day should these dates fall on a weekend. This authority will remain in effect until the Grays Harbor County Treasurer has received written notification of cancellation from me, no less than thirty (30) days before my account is to be charged.

☐ HALF APRIL & HALF OCTOBER ☐ FULL YEAR ON APRIL 30

Routing/ABA Number

The first 9 digits of the encoded line on the bottom of your checks.

Account Number

ATTACH A VOIDED CHECK FROM YOUR ACCOUNT (REQUIRED)

Customer Name	Institution/Bank
Mailing Address	Authorized Signer
City State Zip	
Phone	Email Address

Please include all parcels to be enrolled in Autopay

ATTACH VOIDED CHECK

Grays Harbor County |PO Box 831, Montesano, WA 98563 360-249-3751