



MARTIN COUNTY TAX COLLECTOR

HONORABLE RUTH PIETRUSZEWSKI, CFC

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)

Certificate Holder: _____

Bidder # _____

TIN/FEI #: _____

Financial Institution: _____

Financial Institution's Routing #: _____

Checking Account: _____ Savings Account: _____ Account#: _____

****MUST ATTACH VOIDED CHECK****

I hereby authorize the Martin County Tax Collector's Office to initiate the credit entries to the above referenced account. In case of error, a reversing entry will be made to my account. This authorization will take effect at time of certificate purchase and will remain in full force and effect until the Tax Collector's office has received written notification from my representative or me and has had a reasonable opportunity to act on the changes or termination of this credit agreement. I understand it is my responsibility to notify the Tax Collector's office of any changes in my bank account number.

Signature: _____

Printed Name: _____

Phone #: _____

Email Address: _____

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true. I understand that a person who knowingly makes a false declaration is guilty of the crime of **perjury by false written declaration, a **felony** of the third degree, punishable as provided in s. 775.082, s. 775.083 or s. 775.084.**

<http://taxcol.martin.fl.us>

Main Office

3485 SE Willoughby Blvd
Stuart, FL 34994

Phone Number
772-288-5600

Branch Offices

Indiantown
16550 Warfield Boulevard
Indiantown, FL 34956

Hobe Sound
11734 SE Federal Highway
Hobe Sound, FL 33455

Palm City
3001 SW
Martin Downs Boulevard
Palm City, FL 34990



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