**PROPERTY TAX**

**AUTOMATIC PAYMENT (AUTO PAY) APPLICATION**

Mail to: NYC Department of Finance, Adjustment and Discrepancy Unit, 59 Maiden Lane, 19th Floor, New York, NY 10038

**Instructions:** Use this form to request that your monthly, quarterly, semi-annual, or annual property tax payments be deducted automatically from your bank account. Return this completed form with a voided check to the address above, or fax it to (212) 232-1759. You can also register for auto pay at www.nyc.gov/nycefile to receive email confirmation of your payments.

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**SECTION I - AUTO PAY REGISTRATION OR CANCELATION**

**REGISTER:**
- [ ] Please register me for auto pay. I would like to pay my property taxes:
  - [ ] MONTHLY
  - [ ] QUARTERLY
  - [ ] SEMI-ANNUALLY
  - [ ] ANNUALLY

**CHANGE BANK INFORMATION:**
- [ ] I want to change my routing or my account number.

**REVOCATION:**
- [ ] I want to cancel my auto pay registration.

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**SECTION II - PERSONAL INFORMATION**

1. Name of Applicant: ___________________________________________________________
   PRINT FIRST NAME PRINT LAST NAME PRINT MIDDLE INITIAL

2. Address: _______________________________________________________________________
   NUMBER AND STREET APARTMENT/FLOOR


8. Borough ___________________________ 9: Block: 10: Lot:

If you have more than one property, please attach a list of all properties and their borough, block, and lot numbers.

11. Email Address: __________________________________________________________________________________

   If you use this form to register, rather than registering online, you will not receive email notifications when your payments are withdrawn.

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**SECTION III - BANK ACCOUNT INFORMATION**

**PLEASE ATTACH A VOIED CHECK**

1. Account Holder Name(s): ___________________________________________________________

2. Type of Account:
   - [ ] Checking
   - [ ] Savings
   - [ ] Other: ___________________________________________________________

3. ABA Routing #: __________________________________________________________________
   (nine digit number on the bottom left of check)

4. Bank Account #: _____________________________________________________________

5. Signature: ____________________________________________________________ 6: Date: _________/_______/_______

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AutoPay Appl. Rev. 1.3.2020