

**JOHN A. BURKE, MEDINA COUNTY TREASURER
MONTHLY PREPAY AGREEMENT**

The taxpayer hereby requests the Medina County Treasurer to accept Prepayments towards his estimated real estate property taxes, the next due after the date of signing this agreement, and that Prepayments will be retained in an escrow account until the next current tax collection is open and all Prepayments can be applied toward the payment of real estate property taxes then due.

The taxpayer understands that if full Prepayment has not been received, they will receive a tax bill for the balance that must be paid by the due date or penalties will be applied to any remaining balance.

The taxpayer authorizes the Medina County Treasurer to act as his agent for the purposes of receiving his tax bill(s), and applying Prepayments to the real estate taxes then due.

Monies received as Prepayments in the escrow account will not be released for other than the payment of taxes, except for reasons pertaining to transfer of ownership, death of the taxpayer, or as required by law. Excesses remaining in an escrow account after the payment of real estate taxes will (1) remain and be applied toward future real estate taxes, or (2) be returned to the taxpayer upon application to the County Treasurer.

For purposes of this agreement, the County Auditor's Conveyance of Real Property Transfer Record shall control in matters of ownership and transfer. In the event of death, a death certificate shall be required. In all other matters, Section 321.45 of the Ohio Revised Code shall apply.

Date Signed

Signature of Taxpayer

e-mail

Phone number

Please list all parcel numbers:

Mailing Information:

Name

Address

Address

City, State, Zip code

For Treasurer's Office use only:

Deputy signature

Date



SIGN UP FOR AUTOMATIC PAYMENT PROGRAM

Please complete and return this form along with a voided check or a saving's deposit slip to:
John A. Burke, Medina County Treasurer • 144 N. Broadway St. • Medina, OH 44256

I authorize the Medina County Treasurer's Office to instruct my bank/savings institution to make my monthly tax payments from the account listed below. I understand that I control my payments, and if at any time I/we decide to discontinue this payment service, I/we will notify the Medina County Treasurer's Office in writing.

CUSTOMER INFORMATION (Please Print) Parcel Number: _____

Customer Name (as shown on tax bill): _____ Date: _____

Property Address: _____

Signature: _____ E-mail address: _____

REQUIRED BANKING INFORMATION:

Name of Financial Institution: _____ Branch: _____

Routing # _____ Account # _____ Checking Savings