



Lake County Treasurer

Holly Kim  
18 North County Street – #102  
Waukegan, IL 60085-4335  
(847) 377-2323

**Automatic Withdrawal Application, Change, or Cancellation**

18 N. County St. Room 102

Waukegan, IL 60085

Fax: 847-984-5899

E-Mail: Treasurer@LakeCountyIL.gov

Name: \_\_\_\_\_

PIN #: \_\_\_\_\_

Choose **ONE** of the following options:

- I want to enroll in the Automatic Withdrawal Program
- I am currently enrolled in the Automatic Withdrawal Program and would like to request a change
- I no longer wish to participate in the Automatic Withdrawal Program

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

(only fill out if different from above)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Choose **ONE** of the following payment options:

- Total Tax Bill Paid in Full on the 1<sup>st</sup> Installment Due Date
- Taxes Paid in 2 Installments on the Due Dates

I hereby authorize the Lake County Treasurer to withdraw funds according to my selection below:

- Checking
- Savings

Routing #: \_\_\_\_\_ Account #: \_\_\_\_\_

**Please enclose a voided check or letter from your financial institution stating your routing and account numbers.**

This Authorization will remain in effect unless the Treasurer receives **WRITTEN NOTIFICATION** from you two weeks before the due dates. If you participated last year and have no changes, there is no need to re-apply.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you have any questions regarding this form please feel free to call our office at 847-377-2323