



AUTOMATIC PAYMENT AUTHORIZATION

I hereby authorize Pinery Water & Wastewater District to initiate debit entries by electronic means to my account at _____ Bank. This authorization shall remain in effect until both Pinery Water & Wastewater District and the Bank have received written notification from the undersigned to terminate this agreement.

Name _____

Address _____

City/State/Zip _____

Phone Number _____

Email Address _____

Pinery Water & Wastewater District Account # _____

Please list other Pinery Water & Wastewater District account numbers (if applicable) # _____ # _____

Bank Routing Number: _____

Bank Account Number: _____

Checking Savings

Signature _____ Date _____

Please include a voided check from the designated checking or savings account with this form. No deposit slips please.

*******If you have a balance forward on your account at the time the District processes your first automatic withdrawal, the *total amount due* (including the previous outstanding balance) will be withdrawn from your account.**

Pinery Water & Wastewater District
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pinerywater.com