

SIGN UP TODAY FOR
AUTOMATIC BILL PAYMENT

The Automatic Payment Plan will help you in several ways:

- ❖ It saves time – fewer checks to write.
- ❖ Helps meet your commitment in a convenient and timely manner – even if you're on vacation or out of town.
- ❖ No lost or misplaced statements, your payment is always on time.
- ❖ It saves postage.
- ❖ It's easy to sign up for, easy to cancel.

Mail- Mail completed authorization form with bank account information to **18100 E. Woodman Drive, Parker, CO 80134** (*do not return with your payment or to the PO Box; the request may not be processed*)

Fax- Fax completed PWSD authorization form and image of voided check or financial institution's form with account information to **303-841-8992**

Email- Scan voided check or financial institution's form with account information & completed PWSD authorization form to billing@pwsd.org

Note: If you choose to Fax, please call our office at 303-841-4627 – Option 5 to confirm receipt.

To authorize Parker Water & Sanitation District to deduct your payment automatically, fill in the Authorization Form below. **Please print** your name, property address, and mailing address if applicable. Check the appropriate box to indicate whether this is a checking or savings account. **Remember to sign and date this form.** Please include a **voided check or your financial institution's ACH verification form indicating account information (NOT a deposit slip)**. The bank/financial information must include an accurate routing number and your full account number in order to be processed.

Account is set up with ACH when your bill says: **“Total Due will be collected by Automatic Payment on the last business day of the month.”**

If you have any questions, we would be happy to assist you. Call us at 303-841-4627, Option 5.

RETAIN FOR YOUR RECORDS

On _____ I authorized Parker Water and Sanitation District 18100 E. Woodman Dr., Parker, CO 80134
(Date) 303-841-4627
to initiate electronic entries to my checking/savings account and have agreed to the terms listed on the authorization. I may revoke my authorization with Parker Water & Sanitation District at any time **in writing** to the above mailing address or to the e-mail address billing@pwsd.org, and by giving written notice to my bank.

Payment amount will vary, but will be shown on my monthly billing statement.
Withdrawal date will be the last business day of each month.

RETURN BOTTOM PORTION WITH YOUR VOIDED CHECK OR FINANCIAL INSTITUTION'S ACH FORM

!-----!-----!

Automatic Payment Authorization

I hereby authorize Parker Water and Sanitation District to initiate debit entries by electronic means to my account at _____ Bank.

This authorization shall remain in effect until both Parker Water and Sanitation District and the bank have received **written** notification from the undersigned to terminate this agreement.

Name _____

Property Address _____ Mailing Address _____
City/State/Zip _____

Parker Water Account Number(s) _____ - _____ , _____ - _____

- Checking
- Savings

Please include a **voided check, financial institution ACH form, or savings slip** with this form

Signature _____ Date _____ Phone # _____

PLEASE VOIDED CHECK HERE