

Humboldt Community Services District

Dedicated to providing high quality, cost effective water and sewer service to our customers

AUTOMATIC PAYMENT AUTHORIZATION

Use this form to authorize HCSD to automatically debit your checking or savings account to pay your monthly bill. You will still receive your monthly bill as usual. The bill will still show the monthly charges, the total due and the due date. But now the bill will also state:

“AUTOMATIC WITHDRAWAL - DO NOT PAY”.

This way you will know the amount and date the funds will be deducted from your checking account. Like a regular check, a returned payment fee will apply if there are insufficient funds for the payment.

<i>Customer Name</i>		<i>Water/Sewer Account #</i>	<i>Service Address</i>
<i>Mailing Address</i>			
<i>City, State, Zip</i>			
<i>Financial Institution</i>	<i>Bank Routing Number</i>	<i>Account Number</i> Checking <input type="checkbox"/> Savings <input type="checkbox"/>	

I authorize Humboldt Community Services District (HCSD) and the financial institution named above to automatically deduct the total amount due of my monthly utility bill from the checking/savings account listed above. I understand the automatic payment will be made on the due date and for the amount due shown on the monthly bill. I further understand that should there be insufficient funds to cover the automatic deduction a returned payment fee will be assessed. Both HCSD and my financial institution reserve the right to terminate this authorization and my participation therein. This authorization will remain in effect until I have notified HCSD in writing to discontinue the automatic withdrawals. Please allow 7 days for the cancelation notice to take effect.

<i>Customer Signature</i>	<i>Date</i>	<i>Phone Number</i>
---------------------------	-------------	---------------------

Attach Voided Check (NOT Deposit Slip) Here

Your Name _____ 1212
 Your Street Address _____
 Your City, State, ZIP _____

Date _____ 7-1784/345 MD
 34566

Pay to the Order of _____ \$ _____
 _____ Dollars

Bank Name & Logo _____
 ACH R/T 121234567

Memo _____

⑆ 2 1 2 3 4 5 6 7 ⑆ ⑆ 2 3 4 5 6 7 3 4 5 6 7 ⑆ ⑆ 1 2 1 2

Your 9-Digit Bank Routing Number Your Bank Account Number

Attach Voided Check (NOT Deposit Slip) Here