## **E-BILL AUTHORIZATION FORM**

I (we) hereby authorize **Samish Water District** to deliver my statements via email. Monthly bills will be e-mailed to you at the same time the bill is normally mailed, the first business day of the month. This authority will remain in effect until **Samish Water District** is notified by me (us) to cancel or make changes to it, in such time as to afford **Samish Water District** a reasonable opportunity to act on it.

(Name-PLEASE PRINT)	(Telephone)
(Site Address-PLEASE PRINT)	(Email Address)
X	
(Signature)	(Date)
X	
(2 <sup>nd</sup> Signature–if any)	(Date)

There are no fees for the e-billing service. Failure to receive a bill shall not excuse the customer's obligation to pay for service before it becomes delinquent. Please contact our office if you do not receive a bill.

Any questions, please contact the District office at (360) 734-5664 Monday through Friday, 8:00 a.m. to 4:30 p.m.