Butler Rural Water District #1

P. O. Box 725

El Dorado, KS 67042

(316) 364-1132

burwd1@yahoo.com

Automatic Bill Payment Plan

The Automatic Bill Payment Plan conveniently pays your monthly water bill by charging your checking account. Automatic Bill Payment is convenient, dependable and the least expensive way to pay your monthly water bill.

ENROLLMENT: Simply complete the authorization form and each month your bill will be deducted from your checking account.

HOW THE AUTOMATIC BILL PAYMENT PLAN WORKS: We will mail your bill card the first week of the month showing the exact amount that will be deducted from your checking account. If you have questions regarding your bill, you will have ample time to call us and resolve your concerns. Your payment will be deducted from your checking account on the 15th of each month. If the 15th falls on a weekend or holiday, the payment will be made the next business day. Payment information will also be shown on the statement you receive from your financial institution.

Terms and Conditions of Authorization

1. Authorization: Review, complete and sign an Authorization Agreement. Each payment shall be the same as if it were in instrument signed by you. Return the Authorization Agreement to:

    > Butler Rual Water District #1
    > P. O. Box 725
    > El Dorado, KS 67042

    > OR

    > burwd1@yahoo.com

2. Revocation: This authority remains in effect until revoked by your financial institution, Butler Rural Water District #1 or you. You must notify Butler Rural Water District #1 to discontinue your Automatic Bill Payment 30 days before the next scheduled payment.

Butler RWD #1 Bank Authorization

This form authorizes Butler Rural Water District #1 and my financial institution to automatically pay my monthly water bill out of my checking account. I agree to all the terms and conditions of authorization.

Your Name   _____

Butler RWD #1 Benefit Unit No. _____ Phone_____

Address_____

City_____State_____Zip_____

Bank Routing No._____

Account No._____

Bank Name_____

Bank Address_____

City_____State_____Zip_____

Date_____

Signature_____