## Teton Water & Sewer Company

(208) 354-0256

If you would like to enroll in this program, please complete this form and return via

E-Mail:

tetonws@silverstar.com, or

Fax:

(888) 373-9723, or

USPO:

Teton Water & Sewer Company

PO Box 786 Driggs, ID 83422

## Account Auto Charge Initiation Form

I	on (Date)	herein submit my
permission to Teton Wat quarterly bill to the follo card will continue to be	ter & Sewer Company to owing credit or debit cate e automatically charged	o automatically charge my ard. I understand that said I until I submit a written
request to modify the met	hod of payment.	
Service Address		
AMEX Visa MasterC	ard (circle one)	
CC #:	Exp. I	Date:
Name as it appears on the	e card:	
Cell Phone #		
Mailing address where ca	ard statement is sent:	
Address # 1:		
Address # 2:		
City:	State:	Zip:
Email Address:		
Signature:	D	ate:
*Your card will be charge	ed on/about the 2th of Janua	ary, April, July and October.