

MT. VIEW-EDGEWOOD WATER COMPANY 11610 – 32ND STREET EAST EDGEWOOD, WA 98372-2099

Phone: (253) 863-7348; Fax: (253) 863-0752 www.mtvewater.com



AUTHORIZATION TO SETUP AUTOMATIC PAYMENTS (AUTOWITHDRAWAL)

By signing up for automatic payments your water bill will be paid automatically from your checking account.

- Free: No cost to you.
- Save Time and Money: Save the cost of postage, checks, late fees, and time mailing envelopes.
- **Peace of Mind:** Rest assured your payment won't be late (even if you are out of town).

How Does it Work?

Customer Name:

Service Address:

You authorize Mt. View-Edgewood Water Co. to withdraw the current bill amount from your checking account on the due date stated on your billing statement. You will continue to receive a statement from Mt. View-Edgewood Water Co. every other month detailing the charges to your account. Your bank statement will serve as proof of payment.

The Automatic Payment Plan is dependable, convenient and easy. To take advantage of this service, simply complete the information requested below and return this form to us. If possible, please include a voided, blank check.

IMPORTANT: PLEASE CONTINUE TO PAY BY CHECK, CREDIT/DEBIT CARD OR CASH UNTIL YOUR WATER BILL INDICATES PAYMENT WILL BE DEDUCTED FROM YOUR FINANCIAL INSTITUTION ACCOUNT.

I elephone #:	water Co Acct. #:
Financial Institution Name	
Routing #:	Financial Institution Acet #:
AU	TOMATIC PAYMENT AUTHORIZATION & ENROLLMENT REQUEST
the amount due on my bill each bill transactions initiated by the Mt. Vie check, credit/debit card or cash unt	Water Company to withdraw a variable sum from the account identified above for payment of ing cycle. I further authorize the financial institution named in this request to schedule such tw-Edgewood Water Company to be paid as directed. I understand I should continue to pay by ill my water bill indicates that payment will be deducted from my financial institution account.
oill's due date to stop the schedule	i payment.
f my Automatic Payment is returne the Automatic Payment program.	d by the bank for any reason, I will be charged a returned item fee and I may be removed from
Signature:	Date: