

PINETOP WATER COMMUNITY FACILITIES DISTRICT
2256 S. PENROD LANE
PINETOP, ARIZONA 85935
PHONE: (928) 367-2022
FAX: (928) 367-2710
EMERGENCY AFTER-HOURS: (928) 358-7482
EMAIL: BILLING@PINETOPWATERCFD.COM

ACH BANK DRAFT AUTHORIZATION FORM

CUSTOMER INFORMATION

Name: _____
Account Number: _____
Email Address: _____
Phone Number: _____

FINANCIAL INSTITUTION INFORMATION

Bank Name: _____
Bank Routing Number: _____
Name on Account: _____
Account Type (circle one): CHECKING / SAVINGS
Account Number: _____

Please attach a copy of a voided check and return with completed application

I certify that the information above is correct, that I am an authorized signer of the account provided for ACH transactions, and that I am authorized to provide this information.

I authorize the financial institution named above to deduct my payment from my checking or savings account monthly on or shortly after the 15th of every month.

I understand that I must contact Pinetop Water Community Facilities District concerning bill discrepancies prior to the scheduled draft date. I may cancel this authorization by notifying Pinetop Water CFD. I understand Pinetop Water CFD will have 30 days for any changes to this agreement to go into effect.

Pinetop Water Community Facilities District reserves the right to cancel any Electronic Fund Transfers due to insufficient funds.

Print Authorized Name

Authorized Signature