



Mammoth Community Water District

P.O. Box 2117

1315 Meridian Blvd

Mammoth Lakes, CA. 93546

(760)924-4520

Email at: billing@mcwd.dst.ca.us

Authorization Agreement For Automatic Draft Payment

Your payments will be automatically deducted on the 20th of each month (or the first business day after the 20th) from your checking account at no charge. **Please fill out the information below and return it to the Mammoth Community Water District.**

I (we) hereby authorize Mammoth Community Water District, hereinafter called COMPANY, to initiate debit entries to my (our) checking account and the depository institution named below, hereinafter called DEPOSITORY, for the amount due on my (our) water/wastewater bill.

Service Address _____

Mammoth Community Water District Account Number _____

Your Bank Name _____ Branch _____

City _____ State _____ Zip _____

Name(s) on Bank Account _____

Depository Transit/ABA (routing) Number _____

Depository Account Number _____

This Authority is to remain in full force and effect until Company has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Company and Depository a reasonable opportunity to act on it.

Name(s) of authorized person(s) (please print) _____

Date _____ Signature(s) _____

By typing in my/our name(s) above, I/we acknowledge signing this agreement.