



KANE COUNTY WATER CONSERVANCY DISTRICT

190 W. Center Street, Suite 200 • Kanab, UT 84741
(435) 644-3997 • Fax (435) 644-8679 • Email: kcwcd@kanab.net

PLEASE CONSIDER PAYING YOUR WATER BILL THROUGH ELECTRONIC FUNDS TRANSFER an easy way to pay a bill by an automatic draft from your checking or savings account each month. It will save you the time of writing a check and the cost of mailing it each month.

To participate, please complete and return this authorization form to the Kane County Water Conservancy District (KCWCD). Please attach a voided check to this form to ensure timeliness and accuracy in processing your request.

Electronic Funds Payment Program Authorization Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone No: _____ KCWCD Account No: _____

Bank Name: _____ Bank Address: _____

Bank Account#: _____ Bank Routing#: _____

AUTHORIZATION

I, _____ (please print), hereby authorize the KCWCD to draw monthly bank drafts on my bank account shown above for the payment of my monthly water bill. I understand that I can discontinue my participation in the electronic payment program by notifying the KCWCD in writing. Both the KCWCD and the bank also may terminate this agreement with 10 days written notice. I understand that the KCWCD reserves the right to limit participation in the program to customers whose accounts are in good standing.

Sign me up for paperless billing. By requesting this service, you will receive **only** an electronic copy of your bill e-mailed to you each month and you will receive a monthly credit of \$1.00. Please provide your e-mail below for this request to be effective.

E-mail Address: _____

Signature: _____ Date: _____

IMPORTANT!!!

Please attach a check marked "VOID" to this authorization form. The date of each withdraw will appear on your monthly billing statement.