

**FORT COLLINS-LOVELAND WATER DISTRICT
SOUTH FORT COLLINS SANITATION DISTRICT**

**UTILITY SERVICES
AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS**

I (we) hereby authorize the FORT COLLINS-LOVELAND WATER DISTRICT and SOUTH FORT COLLINS SANITATION DISTRICT (herein after called DISTRICT) to initiate debit entries for UTILITY SERVICES to my (our) – Checking – Savings account (select one). The financial institution named below (hereinafter call FINANCIAL INSTITUTION) will debit the same to this account.

This authority is to remain in full force and effective until DISTRICT and FINANCIAL INSTITUTION receive notification from me (or either of us) of its termination in such time and in such manner to allow DISTRICT and FINANCIAL INSTITUTION a reasonable opportunity to act on it. I UNDERSTAND THAT THE AUTOMATED PAYMENT SYSTEM WILL NOT ACTIVATE UNTIL THE SECOND BILLING AFTER SIGN-UP AND IF THE UTILITY SERVICE ACCOUNT IS CLOSED THAT THE FINAL BILLING WILL NOT BE AUTOMATICALLY WITHDRAWN FROM MY (OUR) FINANCIAL INSTITUTION.

UTILITY SERVICE: ADDRESS _____

ACCOUNT NUMBER _____

FINANCIAL INSTITUTION

Name _____ Branch (if applicable) _____

City _____ State _____ Zip _____

Financial Institution Number _____ Account Number _____
(Routing Number)

Return the original of this agreement with a VOIDED CHECK from your financial institution to:

Fort Collins-Loveland Water District
5150 Snead Drive
Fort Collins, CO 80525
Fax: (970) 226-0186

Names(s) _____

Please print

Signature _____ Signature _____

Date _____