

# Valley Center Municipal Water District DIRECT PAYMENT PROGRAM

Many of our customers have asked for a more convenient and less time consuming way to pay their water bill. Our customers have commented on the benefit that would be gained from: (1) not having to remember to make their monthly payment, (2) providing payment protection during vacation, (3) savings on postage, and (4) avoiding the risk of late payment due to slow mail delivery. Based on these benefits, the Board of Directors has approved the **Direct Payment Program**.

How does it work?

1. By signing the agreement below, you would be authorizing VCMWD to debit your checking or savings account for the amount of your monthly water bill. To confirm routing and account numbers a voided check or deposit slip must be included.

2. You will continue to receive a monthly bill so that you will know the amount to be deducted from your bank account. If you question the charges, you must contact VCMWD within five days after receiving the bill. If the bill is not disputed, the amount will automatically be transferred out of your checking/savings account on the date shown on your bill. If you question the charges after the five day period, adjustments can be made on your next bill.

3. If there are insufficient funds (NSF) in your account to cover the direct payment, a service charge will be added. The total due must then be covered in cash, cashiers check or money order. After two NSF's, this contract is voided.

4. You may cancel this agreement by giving VCMWD a 30 day written notice.

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## Authorization Agreement

I/We authorize Valley Center Municipal Water District (VCMWD) to initiate debit entries to my/our ( ) Checking ( ) Savings Account (select one) indicated below at the financial institution (Depository) named below, and to debit the same to such account. **(Include a voided check or deposit slip with authorization)**

Depository \_\_\_\_\_ Branch \_\_\_\_\_

Routing Number \_\_\_\_\_ Depository Acct# \_\_\_\_\_  
(9 digit number at bottom of your check or deposit slip)

Name(s) \_\_\_\_\_ VCMWD Acct# \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_