



BIG PLAINS WATER AND SEWER SPECIAL SERVICE DISTRICT

688 N Paradise Ln, Bldg A, Apple Valley, UT 84737
 Phone: 435-877-1906 · Fax: 435-877-1014 · Cell: 435-877-1299
 Email: jmcginnis@applevalleyut.gov

AUTO BILL PAY AUTHORIZATION

Name on Big Plains Account	
Account Number(s)	
Billing Address	
ACH DEBIT AUTHORIZATION	
Institution (Bank Name)	
9-Digit Bank Routing #	
Bank Account # (Please Attach A Voided Check)	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Customer's E-mail Address	
CREDIT/DEBIT CARD AUTHORIZATION	
Name on Card	
Billing Address	
City, State, Zipcode	
Card Type	<input type="checkbox"/> VISA <input type="checkbox"/> Mastercard <input type="checkbox"/> Amex <input type="checkbox"/> Disc
Card Information	Number: _____ - _____ - _____ - _____ Expiration Date: ____/____ CVV# _____

I authorize Big Plains Water and Sewer Special Service District to submit electronic ACH debit entries on the _____ day of each month of the amount of the monthly billing to the above referenced account, or adjusting debit or credit entries in accordance with U.S. law for the purpose of culinary water services. It is my obligation to notify Big Plains Water and Sewer Special Service District of any changes to my account.

I authorize Big Plains Water and Sewer Special Service District to charge my card to the above referenced account on the _____ day of each month in the amount of the monthly billing. It is my obligation to give notice of any changes associated with the card account.

I understand it is my obligation to notify Big Plains Water and Sewer Special Service District in writing in order to cancel this agreement and give notice in a reasonable time frame to act prior to the cancelation date.

Signature _____ Date _____