

# Humboldt Community Services District

*Dedicated to providing high quality, cost effective water and sewer service for our customers*

## Automatic Payment Authorization

Use this form to authorize HCSD to automatically debit your checking or savings account to pay your monthly bill. You will still receive your monthly bill as usual. The bill will still show the monthly charges, the total due and the due date. The bill will also show that you are enrolled in autopay in the amount enclosed box:

AMOUNT ENCLOSED

AUTO PAY

The bill will inform you of the amount due and the date the funds will be deducted from your bank account. A return fee will apply for any returned payments due to insufficient funds.

\*\*PLEASE UPDATE FRAUD PREVENTION SERVICES TO INCLUDE HCSD COMPANY ID #1946023181\*\*

<i>Customer Name:</i>	<i>Water/Sewer Account #:</i>	<i>Service Address:</i>
<i>Mailing address:</i>		<i>City, State, Zip Code:</i>
<i>Name of Financial Institution:</i>	<i>Routing Number:</i>	<i>Please select:   Checking   Savings Account #:</i>

I authorize Humboldt Community Services District (HCSD) and the financial institution named above to automatically deduct the total amount due of my monthly utility bill from the checking/savings account listed above. I understand the automatic payment will be made on the due date and for the amount due shown on the monthly bill. I further understand that should there be insufficient funds to cover the automatic deduction a returned payment fee will be assessed. Both HCSD and my financial institution reserve the right to terminate this authorization and my participation therein. This authorization will remain in effect until I have notified HCSD in writing to discontinue the automatic withdrawals. Please allow 7 days for the cancellation notice to take effect.

<i>Customer Signature:</i>	<i>Date:</i>	<i>Phone Number:</i>
----------------------------	--------------	----------------------

Optional: Please attach voided check here. Inclusion of a voided check helps to prevent possible errors

The diagram shows a check with a large 'VOID' watermark. Labels with arrows point to the following fields:

- Name of Account
- DATE
- Bank account registration
- PAY TO THE ORDER OF
- \$
- DOLLARS
- Your Bank
- Bank name
- Bank routing number
- Bank account number

Mailing: Post Office Box 158 • Cutton, CA 95534 • tel (707) 443-4558 • fax (707) 443-0818

Email: [customerservice@humboldtcsd.org](mailto:customerservice@humboldtcsd.org)

Physical Address: 5055 Walnut Drive, Eureka, CA 95503