## Automatic Debit Service Application and Agreement

I hereby authorize the Widefield Water and Sanitation District and the financial institute I've indicated to automatically deduct from my designated account all future payments of charges related to my water and sanitation bill. I understand that both the Widefield District and my financial institute reserve the right to terminate this authorization and my participation within. If I choose to terminate this authorization, I will contact the District directly and request this service be discontinued.

Print Name	Signature	Date
Utility Account Number;	Daytime Phone #	
	utility bill;	
	an service address);	
E-Mail Address for Bill Notifica	tion;	
Account Number:		·
	Withdraw From Checking (please return a voided check with the ap	plication)
	Withdraw from Savings (please return a deposit slip with the applic	ation)
Return to Widefield Water	and Sanitation District, 8495 Fontaine Blvd, Colorado Springs (	CO 80925