



# COTTONWOOD WATER DISTRICT

**Mailing Address:**  
P.O. Box 2130  
Cottonwood, CA 96022

**Office Location:**  
3282 Chestnut St.  
Cottonwood CA, 96022

**Emergency Contact:**  
(530) 941 - 4274  
(530) 209 - 1542

**Administrative Contact:**  
Phone: (530) 347 - 3472

**Email:** [apcottonwoodwater@gmail.com](mailto:apcottonwoodwater@gmail.com)

## ACH Autopay Form (Optional)

Name: \_\_\_\_\_

List of Account#(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Service Address: \_\_\_\_\_

Receive bills by E-mail: YES / NO

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

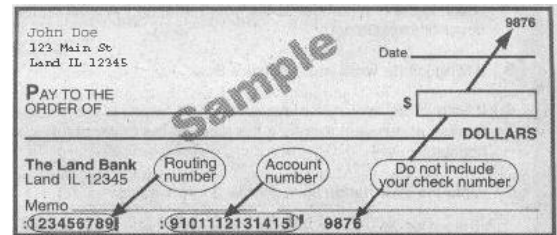
### ACH Bank Draft Payment Sign-up Form:

Bank Name: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_



Account Type (Circle One):    Checking   /   Savings

Automatic Bank Drafts will be generated on the 7<sup>th</sup> of each month following the billing statement date. If the 7<sup>th</sup> falls on a weekend, it will be the Monday following that date.

I certify that the information above is correct, that I am an authorized signer of designate of the account provided for ACH transactions, and that I am authorized to provide this information.

I authorize COTTONWOOD WATER DISTRICT to deduct my utility payments from this bank account via Electronic Fund Transfer. I understand sending a written notification to COTTONWOOD WATER DISTRICT will revoke this authorization.

COTTONWOOD WATER DISTRICT reserves the right to cancel Electronic Funds Transfer due to insufficient funds without notice.

\_\_\_\_\_  
Printed Authorized Name

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Signed Authorized Name

\_\_\_\_\_  
Date: