

Union Public Utility District
339 Main Street, Murphys, CA 95247-9626
209/728-3651

AUTOMATIC DEBIT AUTHORIZATION FORM

I authorize Union Public Utility District to electronically charge my bank account number, as shown below, for all charges for services rendered against my water account.

Customer Name:	
Service Address:	
Mailing Address:	
City/State/Zip:	
Home Phone:	Other Phone:
UPUD Account Number:	
Note: A separate authorization form is required for each UPUD account.	

A VOIDED CHECK MUST BE ENCLOSED TO PROCESS YOUR APPLICATION

Bank Name:
Branch:
City/State/Zip:
Routing Number:
Account Number:
Date of Request:

TERMS AND CONDITIONS

I will continue to receive water bills. If I dispute the amount, I will have 10 days after the bill date to contact UPUD at 209/728-3651.	
The deduction will be made from my account on the due date printed on the statement, or the next business day.	
This authorization will remain in effect until revoked by me or UPUD.	
I understand that for each payment returned, a returned check fee will be applied to my account.	
I will notify UPUD if I change banks or if my bank account number is changed.	
I MAKE AUTHORIZATION SUBJECT TO THE ABOVE TERMS AND CONDITIONS.	
Signature:	Date:

Did you remember to enclose a voided check?