



## TOWN OF BUENA VISTA

Post Office Box 2002  
Buena Vista, Colorado 81211  
Water Billing: (719) 581-1018  
Town Hall: (719) 395-8643  
Fax: (719) 395-8644  
bvutilities@buenavistaco.gov

### Authorization Agreement for Preauthorized Electronic Withdrawals

I hereby authorize **the Town of Buena Vista** to initiate debit entries to my Checking/Savings account indicated below at the depository (Bank or Credit Union) named below, to debit the same to such account for the purpose of paying the monthly **water bill** to the Town of Buena Vista. Said credit to occur each month between the 18<sup>th</sup> and 21<sup>st</sup> of each month.

Beginning date \_\_\_\_\_

Water Service Account Number: \_\_\_\_\_ Service Address: \_\_\_\_\_

DEPOSITORY NAME \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ROUTING NUMBER \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_

ACCOUNT TYPE (Checking or Savings) \_\_\_\_\_

**(Please attach a voided check to this agreement)**

I understand that if an erroneous debit is made to my account the **Town of Buena Vista** and the financial institution are authorized to reverse the entry and make any adjustments necessary to my account to correct the erroneous entry. This authorization is to remain in full force and effect until I provide written notice to cease to the **Town of Buena Vista** in such time and in such manner as to afford the **Town of Buena Vista** and the depository (Bank or Credit Union) institution reasonable opportunity to act on it.

NAME \_\_\_\_\_  
(Please Print)

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

EMAIL \_\_\_\_\_ PHONE # \_\_\_\_\_

**Return this form to Town Hall, 210 East Main St., PO Box 2002, Buena Vista, CO 81211. Call 719-581-1018 or 719-395-8643 Ext. 1018 with any questions.**