

# Jemez Springs Domestic Water Association

## AutoPay Enrollment Form

Customer Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

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### Payment Method (Select One)

☐ **Credit/Debit Card**

Card Type: ☐ Visa ☐ Mastercard ☐ Discover ☐ Diners Club

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date (MM/YY): \_\_\_\_\_ CVV: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

☐ **Bank Account (ACH withdrawal)** (please attach a voided check)

Account Type: ☐ Checking ☐ Savings

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

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

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

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### Authorization and Agreement

I authorize the Jemez Springs Domestic Water Association to automatically withdraw payments from the account or card listed above for my monthly water bills. This authorization will remain active until I provide written notice to cancel. **Payments will be drafted two (2) days before the due date shown on my bill.** I understand that it is my responsibility to ensure funds are available at the time of payment. If payment is returned or declined for any reason, I understand that additional fees may apply and that I am responsible for making prompt payment to bring my account current.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_