



ACH Bank Draft Payments Form

CUSTOMER INFORMATION

Last Name _____
 First Name _____
 Address: _____
 Account No: _____ Telephone: _____
 Email: _____

FINANCIAL INSTITUTION INFORMATION

Bank Name: _____
 Name On Account: _____
 Bank Routing/Transit #: _____
 Account #: _____
 Account Type: (circle one) Checking Savings
 Maximum Draft Amount: Is your highest summer bill which
 will be assigned by the District.

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

I authorize Purissima Hills Water District to deduct my water payments from this bank account via Electronic Fund Transfer. I understand sending a written notification to Purissima Hills Water District will revoke this authorization. Purissima Hills Water District reserves the right to cancel ACH Bank drafts without notice due to insufficient funds.

Print Authorized Name

Signature

Date

Please Mail to: Cory Burkett
 Purissima Hills Water District
 26375 Fremont Rd. Los Altos, CA 94022
 or Email to: coryb@purissimawater.org