

Purissima Hills Water District
ACH BANK DRAFT PAYMENTS FORM

CUSTOMER INFORMATION

Last Name _____ First Name _____
Address: _____
Account No: _____ E-mail: _____
Telephone: _____

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

Cut here

Please fill out ALL of the information on the attached form and mail to:
Ginny To
Purissima Hills Water District
26375 Fremont Rd.
Los Altos Hills, Ca 94022

Or e-mail to:

ginnyT@purissimawater.org