

APN #

IVGID PUBLIC WORKS [·] 1220 SWEETWATER ROAD [·] INCLINE VILLAGE NV 89451 PH: (775) 832-1203 [·] FAX: (775) 832-1260 [·] EMAIL: PW@IVGID.ORG [·] WWW.IVGIDPUBLICWORKS.ORG

ELECTRONIC FUNDS TRANSFER (EFT) MONTHLY UTILITY PAYMENT APPLICATION

Utility payments will be taken from your checking account on the due date indicated on your statement. Monthly statements will continue to be sent indicating: DO NOT PAY - PAID BY AUTOMATIC BANK TRANSFER

Service Address:	Utility Account #:
Name(s):	
Mailing Address:	
Phone #:	
Additional Phone #:	
Email Address (one only):	
EFT AUTHORIZATION	
	(Bank Name) pay for me and post to my age General Improvement District by EFT. This remains in effect until it is
	provide notice of my intent to cancel by the 10th day of the month prior if my EFT is returned by my bank, all of my utility accounts with EFT setup
•	vated and a \$25 charge will be access to each returned payment. In order
	w Electronic Funds Transfer Monthly Utility Payment Application. I red from bank accounts located within the United States of America.
Bank Routing Number	Bank (Checking) Account Number
MANDATORY: PLEA	SE ATTACH A VOIDED CHECK - NO DEPOSIT SLIPS
Yes, I understand that utility payments will be	e handled automatically and accept above terms.
x	
Signature	Date

Х

Signature