

SANTA FE IRRIGATION DISTRICT DIRECT PAYMENT PROGRAM

In order for our customers to be able to pay their bill in a more convenient and less time consuming manner, Santa Fe Irrigation District has initiated the **Direct Payment Program**. We believe that this program will benefit our customers in many ways: the convenience of not having to write a check, elimination of postage expense and avoidance of late payments and possibility of penalties through prompt, timely payment, which also establishes an excellent payment history.

How does it work?

1. You will continue to receive a copy of your bill so you will know the amount to be deducted from your bank account. If you have any questions concerning services or charges shown on the bill, you must initiate a complaint or request an investigation within five (5) days of receipt of the bill. Any such complaint or request must be in writing and filed with the District Review Manager. If not disputed, the amount will automatically be transferred out of your account approximately eighteen (18) days from date of mailing (Date will be shown on your bill).
2. Sign & complete the authorization agreement below. This will allow SFID to debit your bank account for the amount of your bill. This form must be returned at least ten (10) days prior to your next billing to allow enough time to add your account to the system. Please be sure to make your payments as you normally would until you see the Direct Payment message on your bill.
3. If you do not have sufficient funds to cover the direct payment, you will be assessed a \$26.00 service charge and we will require the current payment amount to be covered by cash, cashiers check or money order. After three such occurrences, this contract will be voided.
4. Other than the automatic cancellation for non-sufficient funds, you may cancel this program by giving the District (15) days written notice.
5. Return completed form to:
Santa Fe Irrigation District
P. O. Box 409
Rancho Santa Fe, CA 92067-0409

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS

New Application Change Bank Account Information

I/We hereby authorize **Santa Fe Irrigation District (SFID)** to initiate debit entries to my/our () *Checking* () *Savings* Account (select one) indicated below at the financial institution (DEPOSITORY) named below, and to debit the same to such account. I have included a **voided check** from the same account.

DEPOSITORY _____ BRANCH _____

CITY _____ STATE _____ ZIP _____

ROUTING NUMBER _____ BANK ACCOUNT# _____

This authorization is to remain in full force and effect until **SFID** has received a fifteen (15) day written notification from me (or either of us) of its termination.

NAME(S) _____ SFID ACCT.# _____

Please print

SIGNED _____ DATE _____

DAYTIME TELEPHONE # _____