

# OTAY WATER DISTRICT AUTOMATED PAYMENT APPLICATION FORM

Thank you for your interest in participating in Otay Water District **Automated Payment Service**.

To establish an **Automated Payment Service**, please fill in the required information below and mail to: **Otay Water District at 2554 Sweetwater Springs Blvd., Spring Valley, CA 91978-2096**. Within 10-days you will receive confirmation of your new **Automated Payment Service** with the date of when your payment will be deducted from your checking account. If you have any questions, please call (619)670-2777.

My signature below hereby authorizes Otay Water District to initiate debit entries to the account indicated below.

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
SIGNATURE OF PERSON AUTHORIZED TO SIGN ON  
THE CHECKING ACCOUNT (IF DIFFERENT FROM  
CUSTOMER SIGNATURE).

Please Print Clearly:

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle Initial

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Apt. #

( ) \_\_\_\_\_  
Home Phone #

( ) \_\_\_\_\_  
Work Phone #

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Service Street Address (if different from above).

\_\_\_\_\_  
Otay Water District Account Number

A **VOIDED CHECK** must be taped (**not stapled or glued**) in the area indicated below to ensure an accurate accounting of your transaction.

TAPE CORNERS ONLY

John Smith 1234 Street Ave Chula Vista, CA 12345	Date _____ 1222
Pay to _____ \$ _____	
<b>VOID</b>	and _____ -
123456789 001234567891	

TAPE CORNERS ONLY

**Do Not Write Below This Line Otay Water District Use Only**

\_\_\_\_\_  
Monthly Deduction Date

\_\_\_\_\_  
Start Date

\_\_\_\_\_  
Processed By

\_\_\_\_\_  
Date Entered

\_\_\_\_\_  
Date Customer Notified