

The City of Westminster is here to serve our customers.  
Please tell us how we can improve our service to you.

**Utility bill questions: 647-3200**

**TIRED OF PAYING YOUR UTILITY BILLS?**

Are you tired of trying to remember to drop off your utility payment? Are you tired of spending your time, gasoline, and postage to pay your utility bill? The City of Westminster offers the service of automatic payment of utility bills by bank draft. The service will be provided at no charge, and the customer will never receive a penalty for a late payment!

Customers choosing to participate in the automatic draft service will continue to receive a monthly statement identical to the current bill, except "DRAFT" will appear on the bill.

The draft transfer will be drafted from the customer's bank account on the date the water bill is due, or the next working day, if the bank is not open for business on that day. If the amount being drafted should be questioned, the customer should contact the Utility Department to check reading for error prior to the draft being processed.

Customers wishing to begin this service should bring or mail a voided personal or business check to the Utility Department and complete the attached "Authorization Agreement for Pre Authorized Payments Form". The Utility Department is located at 100 E. Windsor Street and is open Monday through Friday, 8:00 a.m. to 5:00 p.m., and closed from 1:00 p.m. to 2:00 p.m. for lunch.

**Authorization Agreement Pre Authorized Payments Form**

I(we) hereby authorize the City of Westminster, hereinafter called CITY, to initiate debit entries to my (our) Checking account indicated below at the depository name below, hereinafter called DEPOSITORY, to debit the same to such account for the payment of utilities owed to the CITY.

**PLEASE PRINT**

DEPOSITORY NAME \_\_\_\_\_ BRANCH \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
ROUTING NUMBER \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

This authorization is to remain in full force and effect until CITY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford CITY and DEPOSITORY a reasonable opportunity to act on it.

NAME(S) \_\_\_\_\_ DATE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ UTILITY ACCT. NO. \_\_\_\_\_  
SIGNED X \_\_\_\_\_ SIGNED X \_\_\_\_\_

**PLEASE ATTACH VOIDED CHECK**

WMSW