

Automatic Draft Authorization Form

Return this form to Ute Water with a voided check. Please list one service address per form.

Name (as shown on bill):	
Account Number:	Phone number:
Service address:	
Mailing address (if different than above):	
I authorize Ute Water Conservancy Distriction to make my payments from the action at any time by n	ccount listed below. I understand I
Bank or financial institution:	
Account number:	
Routing number:	
Checking? Savings? (check one	9)
Signature:	Date:

Mail To:

Ute Water Conservancy District
PO BOX 460
Grand Junction, Co 81502