



Kingbrook

Rural Water System, Inc.

PO Box 299 • 302 E. Ash St. • Arlington, SD 57212 • Phone 605-983-5074 • 1-800-605-5279 • Fax 605-983-5636 • office@kingbrookruralwater.com

Please return a voided check with this form. In addition, you will need to call our office or email us every month with your reading on or before the 10th of each month (if the 10th falls on a weekend you have until the next business day to call us). If you forget to call us with a reading, you will need to send a check for that month.

Send readings via PH. 605-983-5074 OR EMAIL TO PAYMENTS@KINGBROOKRURALWATER.COM

If you wish to set up a certain amount to have automatically taken from your account, should you forget to email or call, please let us know by indicating amount of gallons you wish to have deducted below in Auto Pay box.

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

Customer Name: _____

I (We) hereby authorize Kingbrook Rural Water System, Inc., hereinafter called COMPANY, to initiate debit entries to my (our) Checking/Savings account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law.

Depository Name: _____ Branch: _____

City: _____ State: _____ Zip Code: _____

Routing Number: _____ Account Number: _____

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

Name: _____
(Please print)

Date: _____ Signature: _____

NOTE: ALL DEBIT AUTHORIZATIONS MUST PROVIDE THAT THE RECEIVER MAY REVOKE THE AUTHORIZATION ONLY BY NOTIFYING THE ORIGINATOR IN THE MANNER SPECIFIED IN THE AUTHORIZATION.

Auto-Pay Amounts:

Gallons/mo: _____
(See current rate chart for corresponding dollar amount)

(I.E. Gallons/mo: 4000)

For Office Use:

Acct Number: _____

Location: _____

MISSION STATEMENT: To provide member-owners with reasonably priced, reliable, quality water.

Kingbrook Rural Water System, Inc. is an equal opportunity provider and employer.