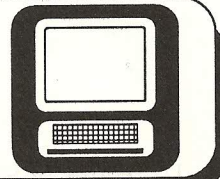


**AUTOMATIC  
BANK DRAFT  
AUTHORIZATION**



**AUTHORIZATION TO PAY WATER BILLS**

COMPLETE THIS FORM AND RETURN TO  
GRAND PRAIRIE REGIONAL WATER DISTRIBUTION DISTRICT

GRAND PRAIRIE REGIONAL WATER DISTRIBUTION DISTRICT

CUSTOMER ACCOUNT NUMBER

(AS LISTED ON YOUR MONTHLY BILL) \_\_\_\_\_

YOUR NAME (as shown

on above account) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

PHONE \_\_\_\_\_

NAME and ADDRESS of \_\_\_\_\_

CUSTOMER'S BANK or

SAVINGS and LOAN \_\_\_\_\_

CHECKING ACCOUNT NUMBER \_\_\_\_\_

OR

SAVINGS ACCOUNT NUMBER \_\_\_\_\_

I authorize you to deduct from my checking or savings account the amount of my monthly water bill and to make that deduction payable to Grand Prairie Regional Water Distribution District. I agree to all the terms on the reverse side of this application.

**Be sure to include a voided check or deposit slip.**

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

NOTE: IMPORTANT INFORMATION ON REVERSE SIDE.