



## Helendale Community Services District Automatic Payment Plan (ACH Debit)

Free up your time for important things in life. When you sign up for the Helendale CSD's Automatic Payment Plan your water/sewer bill payment is debited automatically from your checking or savings account each month. No more checks to write or stamps to buy. It's easy, fast and free!

**Q: How do I sign up?**

**A:** Simply complete the Automatic Payment Plan Authorization Form and return it to our office located at 26719 Vista Rd., Ste. 3 or P.O. Box 359, Helendale, CA 92342-0359

**Q: How soon will the Automatic Payment Plan start?**

**A:** It will take two (2) billing cycles before the Automatic Payment Plan takes effect. Banks encourage a "practice run" for the first billing cycle to make sure it's working properly and that the information is accurate. **Please continue to pay your bill until the message "Direct payment on (Date)" appears in the amount due section of your bill.** Payments will be generally deducted from your account on the due date.

**Q: How can I be sure my bill has been paid?**

**A:** Your monthly bank statement will reflect the automatic payment and your next water/sewer bill will show a payment received.

**Q: Is there a charge for this service?**

**A:** No. The Helendale CSD does not charge you for automatic payments.

**Q: If I don't sign up right now, will I be able to enroll later?**

**A:** Yes. You can enroll at any time. Simply complete the authorization form and return it to our office.

**Q: Is there a charge for Non-Sufficient Funds accounts?**

**A:** Yes. If there are insufficient funds in your account on the day of withdrawal, a Non-Sufficient Funds charge of \$30.00 will be assessed. In addition, your account will be past due and late penalties may apply. Customers who have two payments returned in a 12 month period for insufficient funds will be cancelled from the Automatic Payment Plan.

**Q: What if I change banks or accounts?**

**A:** You must cancel or un-enroll your current bank and re-enroll by completing a new authorization form.

**Q: Will I still receive a bill and how will I know how much will be deducted from my account?**

**A:** You will continue to receive a bill showing the amount due. A message on your bill will confirm your participation. Your bank account will be debited on the due date shown on your bill.

**Attach a voided check** or savings deposit slip to ensure accuracy and complete the application. This payment plan is **not** available to "money order only" accounts.

# Helendale Community Services District

26719 Vista Road, Ste. 3, P.O. Box 359, Helendale, CA 92342-0359

## Automatic Payment Plan Authorization Form

To sign up for our Automatic Payment Plan, complete this authorization and mail or deliver it to our office with a voided check from your checking account or a deposit slip for your savings account, to the address at the top of this form.

Your payment will be deducted from your checking/savings account on the bill due date. You will continue to receive your monthly billing statement with a message appearing in the amount due section indicating "Direct payment on (Date)". **If you do not see this message on your bill, continue to make your payment as usual.** Remember it can take two (2) billing cycles before the Automatic Payment Plan takes effect.

If your ACH payment is returned unpaid a non-sufficient funds charge will be assessed. If a second ACH payment is returned unpaid within 12 months you will be assessed an additional non-sufficient funds charge, **AND** your eligibility for Automatic Payment Plan will be cancelled.

Name(s) \_\_\_\_\_  
(please print)

Service Address \_\_\_\_\_

Helendale CSD Account no. \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

Financial Institution Name \_\_\_\_\_

Location \_\_\_\_\_ Checking or Savings (circle one)

Routing/Transit Number \_\_\_\_\_ Account No. \_\_\_\_\_

I (we) authorize the Helendale Community Services District to collect payment of my (our) water/sewer bill by initiating debit entries (deductions) to the bank account shown above. I understand that this authorization will continue to be in force until discontinued by my written request or until the Helendale CSD has cause to cancel it.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

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