PICACHO SEWER COMPANY

SURE PAY – AUTHORIZATION FOR AUTOMATIC PAYMENT

I (WE) HEREBY AUTHORIZE PICACHO SEWER COMPANY AND THE FINANCIAL INSTITUTION INDICATED BELOW TO INITIATE AND DEBIT THE AMOUNT OF MY (OUR) MONTHLY UTILITY PAYMENT.

Financial Institution:		
Checking Account Numb	oer:	
V	OIDED CHECK MUST BE A	TTACHED
notification from me (us) facsimile or electronic tr ".pdf" or similar electron obligation of the party ex	of its termination. In the ever ansmission, including without ic format data file, such signal accuting (or on whose behalf s	effective until you have received nt that any signature is delivered by limitation by e-mail delivery, of a ture shall create a valid and binding such signature is executed) with the ature page were an original thereof.
Picacho Sewer Company	Account #:	
Customer Name:		
Customer Signature:		
Date:		
Submit documents to or	ne of the following:	
Mail	Email	Fax

Cindy.James@Robson.com

480-895-4326

Picacho Sewer Company

9532 E Riggs Road Sun Lakes, AZ 85248