

AUTHORIZATION TO EMAIL WATER/SEWER BILLS

I hereby authorize the Village of Elmwood to initiate billing to my account listed below. I understand that by initiating this action, I will no longer receive a bill through the United States Post Office.

Further, I agree not to hold the Village of Elmwood responsible for any delay in receiving my bills due to incorrect or incomplete information supplied by me.

This agreement will remain in effect until the Village of Elmwood receives a written notice of cancellation from me.

Water billing occurs on the 1st day of each month for the prior month. I understand that my payment is due on the 15th day of that month.

PRINT NAME _____

WATER ACCOUNT NO. _____

AUTHORIZED EMAIL ACCOUNT _____

AUTHORIZED SIGNATURE _____ DATE _____