



Agassiz Water Users District

217 Main Ave., PO Box 185 Gilby, ND 58235

John Eaton, System Manager

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ACH Direct Withdrawal Authorization Form

Name: _____

Address: _____

Phone: _____ Email: _____ Start Date _____

We now offer Email Statements.

Please specify if you prefer your statement to be emailed or delivered by mail.

(Circle one): First Class Mail Email

Bank Information

Bank Name: _____

Bank Address: _____

Account Holder Name: _____

Account #: _____

Bank Routing #: _____

Please include a voided Check from this account is applicable

I authorize Agassiz Water Users District to withdraw my monthly utility amount according to the following schedule from the account listed above.

Payment will be withdrawn 10th of every month, or following business day if Holiday or Weekend.

Signature: _____ Date: _____

Meter Readings:

Submit your meter reading by finding the form on our **website: AWUD.NET**, under the **Customer Service Tab**.

Or **Email office@awud.net** with your account number and meter reading.

*Disregard if you have an electronic read meter.