

DIRECTORS
WYNN PIPPIN, President
CLIFF JONES, Vice-President
DONNA DINSMORE
JAMES E. MILLER
JON MUESSIG
ROGER OSTERMILLER
BRANDON HURST



1540 Popelka Drive
Billings, MT 59105

DUKE NIESKENS
General Manager
Phone: 252-0539
Fax: 252-0518

ACH Authorization Form

Heights Water account number: _____

Account name: _____

Mailing address: _____

I authorize CWDBH to debit my checking account.

(copy of voided check OR Routing # _____
and Checking account # _____)

Choose which day of the month you would like the payment to pull from your account:

_____ 10th (or the Monday following if the 10th is on a weekend)

_____ 20th (or the Monday following if the 20th is on a weekend)

Please choose:

_____ Pay the balance monthly.

_____ Budget billing \$ _____ (amount) (reviewed annually).

I understand that there will be a \$35 Returned item fee _____ (initial).

Signature of account holder(s) _____

Date: _____ Contact phone #: _____