Town of Mountain Village
455 Mountain Village Blvd Ste A
Mountain Village CO 81435
970.369.6408

Automatic Payment Enrollment

PLEASE COMPLETE AND RETURN:
MAIL: Billing Department, 455 Mountain Village Blvd Ste A, Mountain Village CO 81435
FAX: 970.369.6459 EMAIL: ncepeda@mtnvillage.org

Customer Name:_____ Date:_____

Phone Number:_____

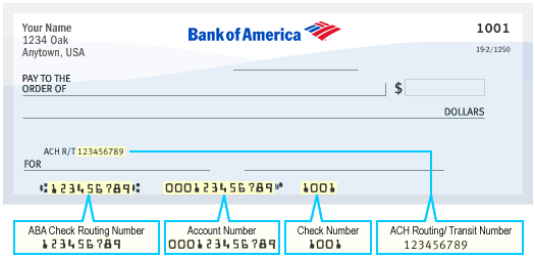
Utility Account Number:

		–					–		

Broadband/Cable Account Number:

			–						

CHECKING/SAVING ACCOUNT ENROLLMENT:



Please fill-out using the exact information that is listed with bank's records

Name: _____

Address: _____

_____

ABA ROUTING NUMBER:

ACCOUNT NUMBER:

CREDIT CARD ENROLLMENT: ☐ VISA/MASTERCARD/DISCOVER ☐ AMERICAN EXPRESS

NAME AS APPEARS: _____

CARD NUMBER:

EXP DATE:

		/		

CVV CODE:

BILLING ZIP:

AUTHORIZATION: As an authorized signer of the account listed above, you herby authorize the Town of Mountain Village to automatically withdrawal payments directly from the account listed above. It is understood that on the due date of each billing cycle your Utility and/or Broadband/Cable account will be charged by the amount of any open invoices. This automatic payment authorization will remain in effect unless otherwise requested in writing.

SIGNATURE:_____ DATE:_____