

SOUTH SHERIDAN WATER AND SANITARY SEWER DISTRICT  
c/o Community Resource Service of Colorado, LLC  
7995 E. Prentice Ave., Suite 103E  
Greenwood Village, CO 80111

March 2018

Dear Residents,

South Sheridan Water & Sanitary Sewer District is now offering **ACH (Automatic Clearing House) or, for a more familiar name, AUTOPAY**. This option allows you to provide your bank information to the District so that your utility bill is automatically paid by them on the due date. This benefits you, the customer, as follows:

- Saves you time as you will have fewer checks to write;
- Helps meet your commitment in a timely manner, i.e. vacation or out of town;
- No lost or misplaced statements, payment is always on time;
- Easy to sign up and easy to cancel

If you would like to sign up for the ACH the form is enclosed. Please complete and return with a VOIDED check. The District does require your signature to authorize South Sheridan Water & Sanitary Sewer District to pull the funds from the checking account you are authorizing. The voided check is to verify that the banking information routing number/transit number and account number are correct.

Mail to: South Sheridan Water & Sanitary Sewer District  
c/o CRS of Colorado, LLC  
7995 E. Prentice Ave., Suite 103E  
Greenwood Village, CO 80111-2710

As always you can contact us with questions regarding the District at 303-381-4960

Sincerely,

Rhonda S. Bilek  
Assistant District Manager  
South Sheridan Water and Sanitary Sewer District  
303-381-4979 [rbilek@crsolorado.com](mailto:rbilek@crsolorado.com)

**SOUTH SHERIDAN WATER & SANITARY SEWER DISTRICT  
7995 EAST PRENTICE AVENUE, SUITE 103E  
GREENWOOD VILLAGE, CO 80111-2710  
(303) 381-4960 • (303) 381-4961 (FAX)**

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**AUTHORIZATION AGREEMENT  
DIRECT PAYMENTS (ACH DEBITS)**

I (we) hereby authorize South Sheridan Water & Sanitary Sewer District hereinafter called DISTRICT, to debit entries to my (our) account indicated below and the Financial Institution named below, hereinafter called FINANCIAL INSTITUTION, to debit same to such account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

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(Financial Institution Name)	(Branch)	
<hr/>		
(Address)	(City, State)	(Zip Code)
<hr/>		
Type of Acct: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
(Routing/Transit Number)	(Account Number)	

This authority is to remain in full force and effect until DISTRICT has received written notification from me (or either of us) of its termination in such time and manner as to afford DISTRICT and FINANCIAL INSTITUTION a reasonable opportunity to act on it.

I understand that if I wish to revoke this authorization, I must notify DISTRICT in writing at least 5 business days prior to the scheduled due date.

<hr/> (Signature)	<hr/> (Signature)
<hr/> (Print individual name)	<hr/> (Print individual name)

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(Date)

***PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM***

<b>PLEASE REMIT BACK TO: SOUTH SHERIDAN WATER &amp; SANITARY SEWER DISTRICT 7995 E PRENTICE AVE – SUITE 103E GREENWOOD VILLAGE, CO 80111-2710</b>
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***IF YOU CHOOSE TO USE THIS SERVICE, IT MAY TAKE ONE BILLING CYCLE BEFORE ACH IS IN EFFECT***