

Stonegate Village Metropolitan District

c/o Mulhern MRE, Inc.
2 Inverness Drive East Suite 200
Englewood, CO 80112
303-649-9857
303-414-0671 fax

Automatic Bank Payment Authorization

Bank Name: _____

Stonegate Village Metropolitan District Account No: _____

Bank Acct Number: _____

Street Address: _____

Bank Routing Number: _____

Contact Phone: _____

Circle One: Checking / Savings
(Please include a voided check or a savings
withdrawal slip)

Name on Account: _____

I authorize the Stonegate Village Metropolitan District ("SVMD") and the financial institution above to withdraw (debit) funds from the above named account (checking or savings) for the purpose of payment of the above SVMD Account No. for water, sewer and other services and billed and payable on the 25th, or the next business day, of every month. If the bank returns this payment to us for any reason, a charge of \$15 (fifteen) will be assessed to your account for bank processing fees. This authorization will remain in full force and effect until SVMD has received written notice of termination 30 days prior to the termination date. **Please allow 30 days for processing.**

I have read and agree to the above terms and conditions.

Signed: _____

Date: _____

****Please send this form in the return envelope with your bill payment or return this form to:**

**Stonegate Village Metropolitan District
2 Inverness Drive East #200
Englewood, CO 80112**