

Stonegate Village Metropolitan District

10252 Stonegate Parkway
303-858-9909

Automatic Bank Payment Authorization

Bank Name

Stonegate Village Metro District Account No.

Bank Account 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. 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
10252 Stonegate Parkway
Parker, CO 80134**