



Automatic Bill Payment Application (ACH Authorization Form)

By signing this form, you authorize Custer Public Power District (CPPD) and your financial institution to automatically debit your checking or savings account for payment of your monthly electric service bill.
Debits will occur on your scheduled billing due date or the next business day.

Customer Information

Customer Name:	
CPPD Account Number (s):	
Phone Number:	
Cell Number:	

Bank Information

Financial Institution:	
City:	
State/Zip:	
Name on Account:	
Routing Number:	
Account Number:	
Account Type: () Checking () Savings	

Authorization

I authorize CPPD and my financial institution to initiate automatic withdrawals from the account listed above. This authorization remains in effect until the written notice of cancellation is received

Customer Signature:		CSR:	
Date:		Date Processed:	

Please attach a voided check with this application.