



Marina Coast Water District

11 Reservation Road, Marina, CA 93933
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Electronic Bill Payment Authorization

Return completed form to MCWD.

Instructions

Please read and complete the Authorization Form below.

To authorize payment from your checking account, please provide checking account information and a blank check marked VOID. Or, to authorize payment from your savings account, please complete the savings account information (contact your bank to determine if your savings account can be used. If it can be used, ask your bank for the ABA Routing Number).

Sign and return this Authorization Form to the Marina Coast Water District along with your voided check (if using your checking account).

How do I sign up for Electronic Bill Payment?

Simply complete the form below and return it to the Marina Coast Water District (MCWD) with a blank voided check (deposit slips and photocopies are not acceptable).

Who is eligible to participate?

Electronic Bill Payment (EBP) is available to all customers of the Marina Coast Water District, whose accounts are in current status.

Can I have EBP withdrawn from any bank account type?

Currently, we are authorized to accept EBP from checking and savings accounts. For checking accounts, simply attach a voided check with the completed form, or, for savings accounts, consult your bank to determine if your account is eligible for EBP.

Will I still receive a MCWD bill in the mail?

Yes, you will still receive a MCWD bill to show what will be deducted from your account.

Is there a charge for this service?

There is no MCWD charge. However, some financial institutions may charge for automatic payments. Please ask your bank about possible fees.

Can I select the date on which the bill is paid?

No. Your MCWD billing cycle will remain the same.

When will the MCWD withdraw funds from my account?

MCWD will withdraw funds from your bank account on the due date of your bill.

Your next water bill will indicate your enrollment into the Electronic Bill Payment Program and will show the amount deducted from your account. Contact our office immediately if you have any questions regarding the payment amount. You may cancel EBP at any time simply by notifying us in writing. If you change banks or account numbers, please complete another Authorization Form.

What if I don't agree with the amount charged on my bill?

If for any reason you dispute your billing, you may contact the MCWD prior to the bill's due date to resolve it before payment is withdrawn.

Can I pay multiple MCWD accounts through this program?

Yes, as long as each MCWD bill is paid from the same bank account, you can sign up multiple accounts under the EBP service.

What if I decide to pay multiple MCWD accounts from more than one bank account?

If you wish to pay multiple MCWD accounts from more than one bank account, simply fill out one application for each bank account.

What if a payment is rejected by bank?

Payments may be rejected by a financial institution for insufficient funds, closed accounts or other reasons. If your payment is rejected for any reason, the MCWD reserves the right to charge a \$15 processing fee on your next bill. Your account will also incur a late charge fee/penalty. The MCWD also reserves the right to discontinue your participation in the EBP program if your payment is rejected more than once in a twelve-month period. Your financial institution may also charge your account fees for rejected payments.

How do I discontinue participation in the EBP program?

You may cancel EBP at any time simply by notifying the MCWD in writing. If you change banks or account numbers, you will need to complete another EBP Authorization Form.

Authorization Form – Please Print Clearly

Customer Name (as it appears on water bill) _____

Mailing Address _____ City _____ State _____ ZIP Code _____

Telephone Number _____

Marina Coast Water District Account Number (as it appears on water bill) _____

Please deduct my payment from one of the following accounts:

Checking account (Enclosed a **VOIDED CHECK**, not a deposit slip.)

Savings account (Contact your bank to determine if this account can be used. If yes, ask your bank for the ABA Routing Number.)

ABA Routing Number _____

Name of Financial Institution _____ Account Number _____

Authorization Agreement for Electronic Bill Payment

I authorize the Marina Coast Water District and the financial institution designated in this application to withdraw from my checking or savings account payment for my water and sewer collection bill. I understand that both the financial institution and the Marina Coast Water District reserve the right to terminate this payment plan and/or my participation therein. I also understand that, at any time, I may elect to discontinue my enrollment in this plan by providing written notice to the Marina Coast Water District.

Signature _____ Date _____