

HILTON CREEK COMMUNITY SERVICES DISTRICT  
ACH DEBIT PROGRAM

CUSTOMER NAME: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_  
BILLING ADDRESS \_\_\_\_\_  
EMAIL ADDRESS \_\_\_\_\_  
Bank Account Routing Number: \_\_\_\_\_  
Bank Account Number: \_\_\_\_\_  
Name on the Account: \_\_\_\_\_  
Driver's License No. \_\_\_\_\_ State of Issue \_\_\_\_\_

**SCHEDULE OF CHARGES: (All fees subject to change)**

| Charge                                                                               | Subject to:                                      | Current Amount              |
|--------------------------------------------------------------------------------------|--------------------------------------------------|-----------------------------|
| Sewer Use Fees                                                                       | Single Family Res.<br>Additional units will vary | 2026-27 \$222.10 (2 months) |
| FEES BELOW APPLY ONLY TO RESIDENTS WITHIN THE<br>JUNIPER DRIVE SPEC. ZONE OF BENEFIT |                                                  |                             |
| Juniper Drive Road<br>Maintenance Fees                                               | Undeveloped Properties<br>Per Property           | \$85.10 (2 months)          |
| Juniper Drive Road<br>Maintenance Fee                                                | Developed Properties<br>Per Property             | \$196.84 (2 months)         |

To be debited on or about the 15<sup>th</sup> day of the month, beginning with the month of the first bi-month billing cycle or after the effective date on this form.

Billing Months: January, March, May, July, September and November

**NOTE: All outstanding invoices will be collected upon the first auto payment unless other arrangements have been made with the Board Secretary.**

I hereby authorize Hilton Creek Community Services District to automatically debit my bank account listed below for the bi-monthly charges according to the schedule on this form, effective \_\_\_\_\_. **Must be dated.**

**Please check statement delivery preference:**      U.S. Mail      Email

| ACCOUNT NO. OR PARCEL NO. | LOCATION |
|---------------------------|----------|
|                           |          |
|                           |          |
|                           |          |

**Signature:** \_\_\_\_\_ **Must be signed**  
**Print Name** \_\_\_\_\_