

Cycle\_\_\_\_\_

**WASHINGTON WATER SERVICE CO**  
**PO BOX 336**  
**Gig Harbor, WA 98335**  
**253-851-4060 (Phone) \* 253-857-4001 (Fax)**

ACCT #:\_\_\_\_\_

**VISA/MASTERCARD**  
**USE AUTHORIZATION**

NAME (AS APPEARS ON CREDIT CARD):\_\_\_\_\_

SERVICE ADDRESS:\_\_\_\_\_

MAILING ADDRESS:\_\_\_\_\_

Credit Card Number:\_\_\_\_\_

Expiration Date:\_\_\_\_\_

(On the back of your card there is a series of numbers by your signature, please give the last 3 numbers): Vcode:\_\_\_\_\_

*I authorize Washington Water Service Co. to charge my monthly water bill to my credit card until such a time as I request, in writing, to stop monthly charges. If Washington Water deems my monthly billing to be excessive they will notify me by mail or telephone prior to charging my account for that month.*

Signed:\_\_\_\_\_ Date:\_\_\_\_\_

Print Name:\_\_\_\_\_