

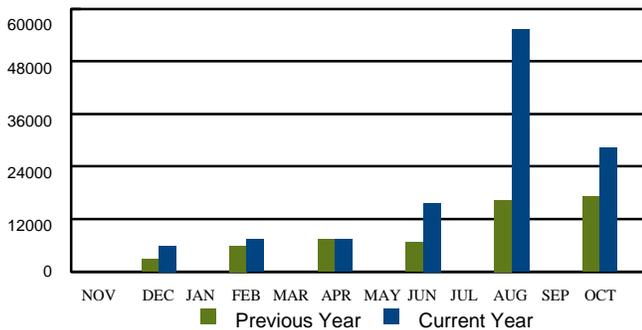


COASTSIDE COUNTY WATER DISTRICT
 766 MAIN STREET
 HALF MOON BAY, CA 94019-1925

Billing Questions Please Call (650) 726-4405
 Office hours are Monday thru Friday, 8:00 a.m. to 5:00 p.m.

Pay or View your bill online at www.coastsidewater.org

2-YEAR CONSUMPTION COMPARISON (IN GALLONS)



This Period Number of Days: 60 Usage: 28,424 GAL. = 38 UNITS
 748 GALLONS OF WATER = 1 UNIT = 100 CUBIC FT.

IMPORTANT MESSAGE

Register today for our free web portal WATERSMART. View hourly and daily water usage. Set up high usage alerts. <https://coastsidewater.watersmart.com> !WaterSmart disponible en español!

ACCOUNT STATEMENT

Account Number 173-00000-00	Due Date 04/25/2019	Amount Due \$69.60
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Account Name	John Smith
Service Address	766 Sample Rd
Billing Date	3/31/2019

ACCOUNT SUMMARY

Previous Balance	\$0.00
Payments Received	\$0.00
Additional Fees	\$0.00
Adjustments	\$0.00
Penalties	\$0.00
PAST DUE BALANCE	\$0.00

CURRENT WATER USAGE

Meter Number	Previous Reading Date	Previous Reading	Current Reading Date	Current Reading	Usage Units
12345678	02/18/2019	119	03/20/2019	124	5

Base Charge **\$27.78**

Water Quantity Charges (per 100 Cubic Ft)

Tier 1	1-4 units	4 @	\$8.83	\$35.32
Tier 2	5-8 units	1 @	\$12.92	\$12.92

Total Water Quantity Charges **\$48.24**

Total New Charges **\$76.02**

Past Due Balance **\$0.00**

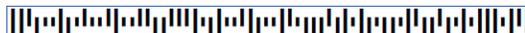
TOTAL AMOUNT DUE **\$76.02**

Keep the above portion for your records and return this portion along with your payment
 Please make check payable to Coastside County Water District



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ADDRESS SERVICE REQUESTED



JOHN SMITH
 766 SAMPLE RD
 HALF MOON BAY 94019

Account Number 173-00000-00	Due Date 04/25/2019	Amount Due \$76.02
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Please check this box and see reverse for change of mailing address (only) and credit card information.

Please contact office if you need to sign in/out of service.

AMOUNT ENCLOSED \$



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COASTSIDE COUNTY WATER DISTRICT

BILLING STATEMENTS

Original Statement is mailed out monthly or bi-monthly on/or about the 1st of the month with 25 days until payment is due.

Late Notice is mailed within five days after due date of original statement with a 10% penalty added.

48 Hour Shut Off Warning Notice to shut-off water is hand-delivered to service address within 5 days after late notice is due. (A \$15 fee will be charged at the time of notice delivery.)

Water Shut-Off due to non-payment will occur 48 hours after the notice has been hand delivered to customer.

OTHER FEES

Deposit for Establishing Service \$75.00
 Non-Sufficient Funds Charge \$25.00
 48 Hour Shut Off Warning Notice Fee..... \$15.00

Reconnect Fee (due to non-payment)

During Office Hours: 8 am - 5 pm (M-F) \$50.00
 After Hours and Holidays..... \$150.00

PAYMENT OPTIONS

Payment by Mail	If paying by check or money order through the mail, please send your payment with the payment coupon. To avoid late fees, please mail your payment at least five to seven business days before the due date specified on your bill.
Direct Debit	Direct debit is the worry-free way to pay your water bill! With this service, the amount due on your billing statement is automatically deducted from your bank account. To set up Direct Debit, simply download, print and complete the ACH Direct Debit Authorization Form located on our website or call our office.
Online Payment	Online Bill Pay makes it convenient for you to manage your Coastside County Water District account. You can view statements online, see payment and usage history and make one-time credit card payments. To access our online bill payment site, login to our website at www.coastsidewater.org . Please contact our office at (650) 726-4405 to set up recurring payment from a credit card.
Personal Online Banking	Many of our customers enjoy the convenience of "Online Banking". Check with your bank to see if they offer online banking service.
District Office	You may pay your bill in person at our office. Payments can be made by cash, check, money order, Visa or MasterCard during normal business hours.
Payment Drop Box	There is a payment drop box located by the front entrance of the District Office for your convenience during business and after hours. Be sure to include your payment coupon or write your account number and service address on your payment to insure correct processing.

FOR CREDIT CARD PAYMENTS : D | VISA | D

Print Name _____ Expiration Date _____

Visa/MasterCard Number _____ CVC/CW Number* _____

Cardholders Signature _____

Phone Number _____

FOR CHANGE OF MAILING ADDRESS:

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

*Your CVC/CVV Number is found on the back of your card on the signature panel. It is comprised of the last three digits appearing on the signature panel.