MOUNTAIN PASS UTILITY COMPANY

SURE PAY – AUTHORIZATION FOR AUTOMATIC PAYMENT

I (WE) HEREBY AUTHORIZE MOUNTAIN PASS UTILITY COMPANY AND THE FINANCIAL INSTITUTION INDICATED BELOW TO INITIATE AND DEBIT THE AMOUNT OF MY (OUR) MONTHLY UTILITY PAYMENT.

Financial Institution:
Checking Account Number:
VOIDED CHECK MUST BE ATTACHED
This authorization is to remain in full force and effective until you have received notification from me (us) of its termination. In the event that any signature is delivered by facsimile or electronic transmission, including without limitation by e-mail delivery, of a ".pdf" or similar electronic format data file, such signature shall create a valid and binding obligation of the party executing (or on whose behalf such signature is executed) with the same force and effect as if such facsimile or ".pdf" signature page were an original thereof.
Mountain Pass Utility Company Account #:
Customer Name:
Customer Signature:
Date:

Submit documents to one of the following:

MailEmailFaxMountain Pass Utility CompanyAgnes.Elsbecker@Robson.com844-257-22979532 E Riggs RoadSun Lakes, AZ 85248