NORTH TEXAS GROUNDWATER CONSERVATION DISTRICT

Billing Information Form				
Contact				
Name		Account I	Number	
Company				
Address				
City	State		Zip Code	
Phone No.		Fax No.		
Email Address				
Preferred method to receive billing (circle one)		MAIL	EMAIL	ВОТН
Preferred Billing Cycle (circle one)	MONTHLY		QUARTERLY	
The District will distribute invoices on or arc requested monthly billing, and on or around who have requested quarterly billing. In order t meter readings have been submitted on or be- after the last day of	45 days afte to receive an fore the 15tl	r the last on invoice for a firm of the m	lay of each quarter or payment, please onth for monthly b	for well owners make sure that all

This form must be completed on an annual basis to keep account information up to date. If there are any changes to your billing or contact information, please contact the District immediately to ensure the invoice is received in a timely manner.

Signature Date

Please submit this form to the District by either fax at (903) 786-8211, email at ntgcd@northtexasgcd.org or mail at:

PO Box 508

Gainesville, TX 76241

For questions, please contact the District at (855) 426-4433