



Trustees

Andrew Belliveau, President
Frank Witham, Treasurer
Richard E. Boston, Clerk
Karen Arsenaault, Trustee
Stephen C. Rendall, Trustee

Administration

Donald D. Neumann Jr., Superintendent
Patrick M. Desrosiers, Financial Manager
Ryan Lynch, Treatment Plant Manager
Gary E. Stevens, Resource Prot. Manager

86 Woodbridge Road
York, Maine 03909
Telephone: (207) 363-2265
Fax: (207) 363-7338
www.yorkwaterdistrict.org

E-BILL ENROLLMENT FORM

GO GREEN! RECEIVE YOUR WATER BILL ELECTRONICALLY

The York Water District is pleased to offer a paperless option to its customers. Instead of receiving a paper bill, you can sign up to receive your water bill electronically via email.

The Benefits of E-bill are:

- The service is absolutely free
- You will receive your bill wherever you may be avoiding a mail delay.
- Paper less billing saves trees, energy and resources
- It's an efficiency to help keep rates lower.

The E-bill will have the same information that you currently see on your water bill. The billing date, due date amount due and other account information will stay the same. You will only receive your bill by email once you sign up for this option. You will not receive a paper bill.

Remember, if your email address changes it is your responsibility to notify the District of your new email address.

Please keep checking the District's Website; www.yorkwaterdistrict.org we are in the process of setting up an Online Bill Pay option as well.

Please contact the District at customerservice@yorkwaterdistrict.org or by calling 207-363-2266 if you have any questions.



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E-BILL ENROLLMENT FORM
Go Green! Receive your water bill electronically
Sign up Today!

In order to sign up for this option, please complete the form and return it to York Water District using one of the following methods.

Mail the form to the York Water District at: 86 Woodbridge Road, York, ME 03909

Fax the form to the York Water District at: 207-363-7338

Scan the form and email to customerservice@yorkwaterdistrict.org

***Note when filling out form for E-billing all information must be completed in order to verify and secure your identity.

First Name/Last Name _____

Account Number _____

Service Address: _____

City/State/Zip _____

Mailing Address: _____

Daytime Phone Number: _____

Email and Disconnect notices

Email Address: _____

Confirm Email Address: _____

Signature _____ Date: _____