

**Cancellation Form for Pre-Authorized Payments for Bi-Monthly Utility Bills**

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

Service Address: \_\_\_\_\_

7-Digit Water Account Number: \_\_\_\_\_ Telephone: \_\_\_\_\_

Financial Institution Name: \_\_\_\_\_ Branch Location: \_\_\_\_\_

I/We \_\_\_\_\_, cancel my/our authorization to issue

\_\_\_ Personal or \_\_\_ Business Pre-Authorized debits on my Utility Bill Account effective

\_\_\_\_\_. I/We acknowledge that this cancellation does not terminate any other obligation that

I/we may have with the Payee.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_