



Cancellation of EFT/CC Deductions **Request Form**

Please cancel:

- Credit card deductions
- EFT from Checking account

Utility Account Number: _____

Customer Name: _____

By signing below I agree that I no longer wish to have automatic payments deducted from the above mentioned method of automatic payment.

Signature: _____

Date: _____

Please note:

If you wish to update the current credit card information on file with us do not fill this form out as it will remove you from automatic deductions completely. Please request an "UPDATE" form to provide us with your new credit card information.