



Sandusky County Sanitary Engineers

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CANCELLATION OF AUTOMATIC BILL PAYMENT

DATE: _____

I, _____, wish to stop the Automatic Clearing House payment withdraw through the Automatic Bill Payment, currently being utilized to make my water and/or sewer utility payment from my:

Savings Account

Checking Account

This will be effective: _____
(Date)

Cancellation of the Automatic Bill Payment may take up to two weeks to occur. The Sanitary Engineers will do its best to accommodate any effective dates submitted within the two week notice.

Customer Account Number: Book: _____ Account: _____

Customer Service Address: _____

Customer Phone Number: _____

Signature: _____

Signature: _____

(if Joint Account)