



TERMINATION OF AUTOMATIC DEBIT (ACH DEBITS)

I hereby request termination of my Automatic Debit services. I understand that any debit entries in the system will remain in full force until such time as the City and its financial institution has a reasonable opportunity to act on my request.

CUSTOMER INFORMATION

Name(s) on Account:

Address:

Telephone Number:

Water Account Number:

SIGNATURE *(Required)*:

Customer Signature:

Date:

**Please return to:
The City of Palm Bay Customer Service
Attn: ACH Debit
120 Malabar Rd. S.E.
Palm Bay, FL 32907**