TONY SEGREST, Manager

PHONE (334) 756-7150 FAX (334) 756-7163

AUTHORIZATION TO DISCONTINUE BANKDRAFT

I authorize East Alabama Water, Sewer & Fire Protection District to <u>discontinue</u> any automatic debit to my bank account monthly on the 6th day of each month. I understand that East Alabama Water, Sewer & Fire Protection Dsitrict shall have ten(10) days from this signed cancellation in order to remove the automatic debit to my account. I understand and agree that this payment method will cease and I will be responsible for future payments to the account/accounts listed.

Name		
Phone number		
Utility Account #		
Signature	Date	
Witness		