



CITY OF SANTA FE SPRINGS
AUTHORIZATION TO CANCEL AUTOMATIC WATER PAYMENTS (DEBITS)

11710 Telegraph Road, Santa Fe Springs, CA 90670 Ph:
(562) 409-7520 F a x : (562) 868-7112

Customer Name _____ Account# _____
Address _____ Ph# _____

I (we) hereby authorize the City of Santa Fe Springs to **CANCEL** debit/credit entries and adjustments initiated by a previous Direct Debit authorization for the account listed below.

***** Effective Date:** _____ *******

TRANSIT ROUTING NUMBER

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CHECKING ACCOUNT NUMBER

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This termination is to remain in full force and effect until the City of Santa Fe Springs has received written authorization to start Automatic Water Payments via a Direct Debit Agreement.

Signature _____ Fed ID# or SS# _____ Date _____

Signature _____ Fed ID# or SS# _____ Date _____

Please submit the completed and signed form at least **two** business days **before** the requested **effective date**. Submit form via one of the following methods:

✚ **Email:** UtilityBilling@santafesprings.org

✚ **In Person:** 11710 Telegraph Road, Santa Fe Springs, CA 90670

✚ **Fax:** (562) 868-7112