

The Town of Spring Lake



Water Department
300 Ruth Street
Post Office Box 617
Spring Lake, NC 28390-0617
Phone: 910-703-8912
Fax: 910-436-1433
www.spring-lake.org

Discontinue Automatic Bank Draft Option

Instructions

To be removed from our Automatic Bank Draft payment option, please complete and bring, mail or fax this form to the Town of Spring Lake at the indicated office, mailing address or fax number. After we receive this signed form, your account will be removed from the program, and your monthly payment will no longer be drafted from your bank account. This form must be received at least **15 business days** prior to the due date (the 10th) of your next bill to avoid the automatic drafting of your bank account.

After the Automatic Bank Draft is discontinued, the change will be evident on your Town of Spring Lake bill because it will no longer indicate **“DO NOT PAY.”**

Please be assured that your bank account information will be used only for the purpose of processing your removal from the automatic payment program and that we will continue to maintain the confidentiality of your bank account information.

Authorization Form

This form directs Town of Spring Lake to stop charging my monthly Town of Spring Lake invoice to my bank account. I understand that this form must be received **15 business days** prior to the due date of my next bill to avoid additional charges to my bank account.

Name(s) Shown on Town of Spring Lake Bill _____

Service Address _____

Account Number(s) _____

Phone Number: _____

Bank Name _____

Bank Account Number _____

Signature _____

Date _____

I would like to confirm that I am receiving my bills via **(SELECT ONE)**:

Mailing Address: _____

E-mail: _____

Return, Mail, or Fax to:
Town of Spring Lake
Water Department
P.O. Box 617
Spring Lake, NC 28390-0617
Fax: 1-910-436-1433

FOR OFFICE USE ONLY

Date Received _____

CSR _____