

COMMISSIONERS
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Chairman

KEVIN D. SHARK
Vice-Chairman

WILLIAM A. JORDAN
Commissioner

Bay County Department of Water and Sewer

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RYAN W. GOEBEL, DIRECTOR



Bay County Road Commission
JAMES C. LILLO, P.E.
ENGINEER-MANAGER

Electronic Fund Transfer Cancellation Authorization

I authorize the Bay County Department of Water and Sewer (DWS) to cancel and enroll withdrawals from my new account at the financial institution named below on this form for payment of my quarterly utility bill.

Water / Sewer Account Number:

Name on Water / Sewer Account:

Service Address:

Financial Institution Name:

Signature:

New Electronic Fund Transfer Enrollment Authorization

Financial Institution Name:

Routing Number:

Account Number:

Checking or Savings

Print Authorized Account Holder:

Signature of Authorized Account Holder:

Date:

Telephone:

You may email this form to: csr@baycountydwsmi.gov or mail to the address listed above

For Office Use:

ENTERED: _____

DATE: _____

CHECKED: _____

DATE: _____