

COMMISSIONERS  
WILLIAM E. SCHUMACHER  
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KEVIN D. SHARK  
Vice-Chairman

WILLIAM A. JORDAN  
Commissioner

## Bay County Department of Water and Sewer

3933 PATTERSON ROAD, BAY CITY, MICHIGAN 48706  
TELEPHONE (989) 684-3883 FAX (989) 684-5510  
[www.baycountydwsmi.gov](http://www.baycountydwsmi.gov)

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 withdrawals from my account at the financial institution listed below for payment of my quarterly utility payment.

Water/Sewer Account Number: \_\_\_\_\_

Name on Water/Sewer Account: \_\_\_\_\_

Service Address: \_\_\_\_\_

Financial Institution Name: \_\_\_\_\_

Routing Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Checking Account or  Savings Account

Printed Authorized Bank Account Holder Name: \_\_\_\_\_

Signature of Authorized Bank Account Holder: \_\_\_\_\_

Telephone: \_\_\_\_\_

Date: \_\_\_\_\_

You may e-mail this form to: [csr@baycountydwsmi.gov](mailto:csr@baycountydwsmi.gov) or mailed to the address listed above.

**For Office Use:**

ENTERED: \_\_\_\_\_

DATE: \_\_\_\_\_

CHECKED: \_\_\_\_\_

DATE: \_\_\_\_\_