

REQUEST FOR REMOVAL OF AUTO DRAFT PAYMENTS
(Please send a copy of your driver's license for verification of request)

Please notify in advance the Waterworks District 2 within 72 hours from the date of the draft.
The Auto drafts are completed the **week of the 10th** each month.

I hereby request Waterworks District No. 2; Parish of Beauregard to remove my water utility account from auto draft effective _____.
(date)

Name of Bank/Financial Institution: _____

Transit/ABA/Routing No. _____ Account No. _____

Name on Account _____ Utility Account No. _____

Service Address _____

City _____ State _____ Zip Code _____

Home phone # _____ Cell phone # _____

Signature _____ Date _____

Central Office Use

Date received _____ Removal date: _____

Received by: _____

(Representative signature)