



## TOWN OF CLAYTON

Utilities & Billing

111 E. Second St., P.O. Box 879

Clayton, NC 27528

Phone: 919-553-5002

Fax: 919-553-0719

utilities@TownofClaytonNC.org

Account # \_\_\_\_\_

# BANK DRAFT CANCELLATION

Name of Customer: \_\_\_\_\_

Phone #: (home) \_\_\_\_\_ alternate \_\_\_\_\_

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

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

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

I hereby authorize the Town of Clayton to remove my account from the bank draft program effective on the following date: \_\_\_\_\_. This authorization will remain in effect until the Town has received a new agreement from me. I understand that I must cancel my draft at least fifteen (15) days prior to my draft date.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date