

DEKALB COUNTY, GEORGIA DEPARTMENT OF FINANCE – UTILITY CUSTOMER OPERATIONS ACH RECURRING PAYMENT CANCELLATION FORM



ACH Cancellation Request Form

Name:
Customer Number:
Bank Account Number (last 4 digits):
Service Address:
Email Address:
Daytime Phone Number:
I hereby request the cancellation of the ACH Recurring Payment debit previously authorized on my account.
I understand that this request may take up to 2 business days to be processed and I am responsible for any and all fees that may occur during this time. If provided with a valid email address, an email will be sent to confirm cancellation.
Every attempt will be made to satisfy the request of the account holder, however DeKalb County will not be held liable for requests made within 3 business days of the payment due date. As an account holder, please also understand that it is necessary to provide the correct information related to the transaction(s) sufficient to enable the identification of the account and transaction(s) in question.
Signature: Date:
Cancellation requests can be emailed to dekalbcountyga.gov . Please include in the subject line, ACH Cancellation. You can also fax the form to (404)371-2679 or mail to the address below:

Utility Customer Operations
Attn: Billing-ACH
774 Jordan Lane
Suite 200
Decatur, GA 30033

For any questions about your bill, please call Customer Care at (404) 378-4475 prior to the due date.

I authorize the Department of Finance of DeKalb County, Georgia and the bank of financial institution indicated above to automatically debit my account for payment of water billing for the indicated account. I agree that in no event shall DeKalb County or the financial institution be liable for indirectly or consequential monetary damage resulting from authorized automatic debit transactions. This authority agreement will remain in effect until I cancel in writing, and I agree to notify DeKalb County in writing of any changes in my account information or termination of this.