



Easton Suburban Water Authority

AutoPay Cancellation

For ESWA Use Only:
Acct# _____
Date Rec'd _____
Date Entered _____
By: _____

Complete the form below and mail it to our office at:

Easton Suburban Water Authority
Attention: AutoPay
P.O. Box 3819
Easton, PA 18043-3819

If you prefer, you may drop it off at our office, but be sure to enclose it in a sealed envelope and mark "AutoPay" on the front.

Customer Information

Name _____ Phone # _____

Easton Suburban Water Authority Account Number _____

Address _____

City _____, State _____ Zip _____

Township/ Borough _____

Please cancel the AutoPay Program for the Easton Suburban Water Authority water account listed. I understand that a payment may already be in process and may still be deducted from this account.

Signature _____

Date _____