



Customer Service  
 65 Stone Street | Cocoa, FL 32922  
 Phone: (321) 433-8400 | Fax: (321) 433-8408  
 Email: [autopay@cocoafl.org](mailto:autopay@cocoafl.org)

## Automatic Debit (ACH) Agreement

Section I (please check one)

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

### Authorization to Start Automatic (ACH) Debit:

I hereby authorize the City of Cocoa to initiate debit entries, credit entries and, if necessary, adjustments to the bank account at the financial institution named below. Any additional location activated for utility service under my Customer Identification Number, including unauthorized service at any property which I own, will be automatically added to this agreement. This authority is to remain in effect until the City of Cocoa has received written notification from me of its termination. The first bill following submission of this form will be pre-noted (tested). If the pre-note is successful, your ACH Debit will be in effect on the following bill. ACH Debit will draft approximately fourteen (14) days from the bill date.

### Authorization to Terminate Automatic (ACH) Debit:

I hereby request to cancel the automatic bank draft from my bank account listed below effective this date. I am aware that if the bank draft has already been processed, this request will not be effective until the next billing cycle. This form will terminate ACH debits for all locations associated with my Customer Identification Number.

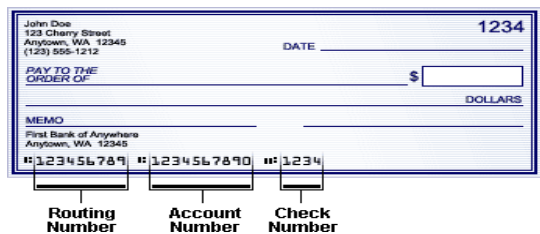
**Note: A void check must be attached for both activation and termination, deposit slips cannot be accepted. You may submit your completed application and attached voided check to [autopay@cocoafl.org](mailto:autopay@cocoafl.org).**

### Section II Customer Information (please print)

Name	Last		First		MI
	_____				
Service Address	Number	Street	City	State	ZIP Code
	( )		( )		( )
Phone	Cell		Home		Work
	_____				

### Section III Bank Information (please print)      Checking Account Information

Financial Institution	Name		Branch Location
	_____		
Address	City	State	ZIP Code
	_____		
Routing #'s	Transit/ABA# (9 positions)		Account #
	_____		



Customer Signature  
 Date