

**CITY OF EDGEWATER  
FINANCE DEPARTMENT**

104 North Riverside Drive  
P.O. Box 100

Edgewater, Florida 32132

customerservice@cityofedgewater.org

Phone: (386) 424-2400

FAX: (386) 424-2409



**CANCELLATION OF AUTOMATIC  
FUNDS TRANSFER**

Today's date: \_\_\_\_\_

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

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

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

I hereby give notice to the City of Edgewater to cancel my Automatic Funds Transfer Account.

Date for Cancellation: \_\_\_\_\_

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

If in the future you would like to reactivate your account, you will need to fill out a new request form.