



# TAPP – TAMARAC AUTOMATIC PAYMENT PLAN CANCELLATION FORM

Please complete and sign this application.

You can mail it, or drop it off at City Hall, 7525 NW 88<sup>th</sup> Avenue, Tamarac, Florida 33321, or fax it to 954-590-3595.

### Utility Account Information:

Utility Account # (as it appears on your bill): \_\_\_\_\_ - \_\_\_\_\_

Name on water account: \_\_\_\_\_

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

Mailing Address (if different): \_\_\_\_\_

Phone # \_\_\_\_\_ Alternate # \_\_\_\_\_

Email address \_\_\_\_\_

### Financial Institution Information:

**CANCELLATION DATE:** \_\_\_\_\_

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

Name on your bank account \_\_\_\_\_

PLEASE PRINT

I hereby authorize the City of Tamarac to **cancel** any further monthly debit transactions (drafts) from my bank account referenced above to pay for the utility account listed on this form. I understand that the City will add a return item fee for all NSF transactions, and that my utility service will continue to be subject to late fees and the risk of disconnection in case I fail to pay the outstanding amount on the bill. I understand and agree that I will not hold the City liable for errors or omissions arising from my Financial Institution. I also understand that regardless of errors and omissions that may come from my Financial Institution it is my obligation to make my utility bill payment, and satisfy whatever amount is past due. I am also aware that it will take one to two billing cycles for the actual **cancellation** to take place, so I am, therefore, advised by the City to pay any outstanding balances on my account in order to avoid interruption of service.

### AGREED AND ACCEPTED BY:

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for enrolling in our automatic payment service  
Should you have any questions please contact us at 954-597-3590