

FOR INTERNAL USE ONLY

Bank Routing #	
Bank Account #	
SH Customer Acct #	

AUTOMATIC DRAFT/ACH DEBIT CANCELLATION FORM

Please complete this form and submit it to the Spring Hill Utility Billing/Water Department by one of the methods below:

- Email to: shwater@springhilltn.org
- Mail to P.O. Box 789, Spring Hill, TN 37174
- Place it in the payment drop-box at City Hall
- Bring it to the Utility Billing/Water Department office in-person, which is located inside Spring Hill City Hall at 199 Town Center Parkway, Spring Hill, TN 37174.

I/we hereby authorize the City of Spring Hill, hereinafter called COMPANY; to cancel debit entries to my/our checking account indicated below at the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

COMPANY: Spring Hill Utilities

FED ID #: 62-0692693

BANK NAME: _____

Name(s): _____
(Please Print)

Date: _____

Phone #: _____

Address: _____

Signature: _____

199 Town Center Parkway
P.O. Box 789
Spring Hill TN 37174

Phone: 931-486-2252
Fax: 931-486-0516
www.springhilltn.org

6/21/2023