

CITY OF FRUITLAND

200 S. Whitley Drive
Po Box 324
Fruitland, ID 83619
Phone: 208-452-4421
Fax: 208-452-7032

www.fruitland.org
msmith@fruitland.org



CANCEL
DIRECT PAY
AND/OR
LEVEL PAY

CUSTOMER INFORMATION

Customer Name:

Utility Account Number:

Service Address:

Mailing Address: (if different)

Home Phone:

Cell Phone:

Email Address:

Select one:

I hereby request and authorize the City of Fruitland's Utility Billing Department to cancel my Direct Pay upon receipt of this written request. If I choose to use the Direct Pay service with the City of Fruitland in the future, I understand that a new application form will have to be submitted along with a new voided check. I further understand that I will be responsible for paying all balances due by making payment to the City of Fruitland.

Cancel Direct Pay ONLY

I understand if I choose to cancel the Level Pay program my bill will no longer be averaged and I will be required to pay my bill in full upon cancellation.

Cancel Level Pay ONLY

Cancel BOTH Direct Pay and Level Pay

Authorizing Signature: _____ **Date:** _____