



P.O. Box 3020
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AUTHORIZATION TO STOP E-MAIL BILL

Please **STOP** E-Mail Bill on the following Account:

Name (please print) _____

Service Address _____

_____,GA
City Zip Code

Account # (water bill account) _____

Thank you,

Customer's Signature

Date

OFFICE USE ONLY

_____ Customer Service Representative	_____ Date Stopped / E-Mail Bill (Account)