

**Lake Delton Utility Department**  
**DIRECT PAYMENT CANCELATION FOR AUTOMATIC DEBIT**

I (we) hereby cancel the authorization to the Lake Delton Utility Department, to debit my account as of the signed date below.

Name on the Utility Account: \_\_\_\_\_

Utility Account #001-\_\_ \_\_ \_\_ \_\_ - 00

NAME(s): \_\_\_\_\_ Title if Business: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please allow thirty days to process this request.

Please mail this form to:      Lake Delton Utility Department  
   P.O. Box 87  
   Lake Delton, WI 53940-0087

Email to [ldutility@lakedeltonwi.gov](mailto:ldutility@lakedeltonwi.gov) or  
Fax to 608-254-7785