



# GEAUGA COUNTY BOARD OF COMMISSIONERS

Carolyn Brakey, Esq. James W. Dvorak Ralph Spidalieri

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DEPARTMENT OF WATER RESOURCES

12611 Ravenwood Drive • Suite 390 • Chardon, Ohio 44024-9340

## AGREEMENT TO DISCONTINUE BI-MONTHLY PAYMENT DEDUCTIONS

Water/Sewer  
Account Number: \_\_\_\_\_

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

I, \_\_\_\_\_ (printed name of customer) request that the Geauga County Department of Water Resources stop all deductions currently being made from my account. In signing this I, the customer, understand that the payments of any outstanding balances owed on my account at this time, as well as all future payments, are my own responsibility. I also understand that if I choose to participate in this program again, I must complete another application.

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(Signature of Customer)

(Date)