



CITY OF
SANFORD
PUBLIC WORKS & UTILITIES
DEPARTMENT

*e***PAY**

Removal Request Form

City of Sanford Account Number:

Name on Account:

Address:

Phone Number:

Please remove my account from the City of Sanford E-Pay
program effective: _____

Signature:

Date:

For additional information about this time-saving program
Contact Customer Service at
407-688-5100