



LeeWay Service Center
1366 Colonial Blvd.
Fort Myers, Florida 33907

Phone: 239-533-9297
Email: leeway@leegov.com
www.leewayinfo.com

LeeWay Closed Account Form

Name: _____ Account Number (if known): _____
Home Phone: _____ Cell Phone: _____
Email: _____
Address: _____
City: _____ State/ Province: _____ Zip: _____

Refund Address (if different than Account Holder address):

Address: _____
City: _____ State / Province: _____ Zip: _____

I would like close my LeeWay account. I understand I may be charged a \$10 administrative fee if my LeeWay account has not been open for more than 60 days.

Process time for refunds is a minimum of 4 weeks and a maximum of 6 weeks.

Signature: _____ Date: _____

=====Staff Use Only=====

Refund Information:

Check or Credit Card
Credit Card Type: Visa MasterCard Discover American Express
Card Number Ending In : _____ Expiration Date: _____

CSS Name: _____ CSS Number: _____
Date of Request: _____ Amount Requested: \$ _____
Date of Refund _____ Processed by: _____
Check Number: _____ Amount:\$ _____