



Cancellation of Pre-Authorization Plan

FOR UTILITIES AND / OR TAX

Name (Please Print): _____

Address: _____

Email: _____

Phone No. (Res.): _____

Phone No. (Cell): _____

I/We hereby give notice to the City of Fort Saskatchewan that I/We wish to withdraw from

(Please check one or both)

the UTILITY pre-authorized payment plan on the date of _____ for
Utility Account No. _____.

and/or

the TAX pre-authorized payment plan on the date of _____ for
Tax Roll No. _____.

- I/We are aware that this cancellation form must be received **15 days** prior to the next withdrawal/due date.
- I/We warrant and guarantee that all persons whose signatures are required to sign on this account have signed this agreement below.
- **I/We understand that all outstanding amounts now become due and payable and subject to penalties in accordance with the penalty By-law.**
- Nothing in this cancellation form shall be interpreted to relieve the owner/applicant from the obligation to pay outstanding balances, including penalties, owing the City of Fort Saskatchewan in the manner or the date or dates for payment established by bylaws of the City of Fort Saskatchewan
- This form must be completed and signed by an owner or occupant whose name appears on the utility bill or tax roll whichever applies.

Signature: _____ Date: _____

Signature: _____ Date: _____