

Pre-Authorized Cancellation Notice

Please Print Clearly		
Property Owner(s):		
Property Address:		
Utility Account Number:	Effective Date:	16,
Tax Roll Number:	Effective Date:	

I, the undersigned, cancel my/our authorization to withdraw pre-authorized debits against my/our bank account as of the effective dates stated above.

If this is a final utility bill, I acknowledge that it will be debited the following month on its regular withdrawal date.

I acknowledge that this cancellation notice does not terminate any other obligations that I/we may have with the Town of Carstairs.

Signature:

Date:

Important Note

The Town of Carstairs requires notice of cancellations to be received a minimum of five (5) business days prior to the scheduled pre-authorized debit in order to ensure the payment will not be processed.