

CANCEL PRE-AUTHORIZED PAYMENTS

Notification of cancellation must be submitted on or before the 10th day of the month in which the change is to take effect.

Effective date: 10 / / Tax Folio: _____ Utility Account: _____
day/month/year

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Property Address (for service at): _____

Apply changes to:☐

Tax and Utility Accounts

☐

Tax Account Only

☐

Utility Account Only

Cancellation request:☐

Cancel my pre-authorized payments.

No refunds will be issued for payments made through the Pre-Authorized Payment Program upon request. In the event that a property is sold, any credit balance remaining on the account should be adjusted between the parties through their conveyancer.

Print Name: _____ Signature: _____ Date: _____

Email completed form and any attachments to covdata@vernon.ca; or submit to City Hall.

Personal information is collected for the purposes of processing this authorization. The City of Vernon is collecting this information under s.26 of the Freedom of Information and Protection of Privacy Act. For any questions regarding the collection of personal information, please contact the FOI Clerk at foirequest@vernon.ca or 250-545-3491.