

TOWN of
COALHURST

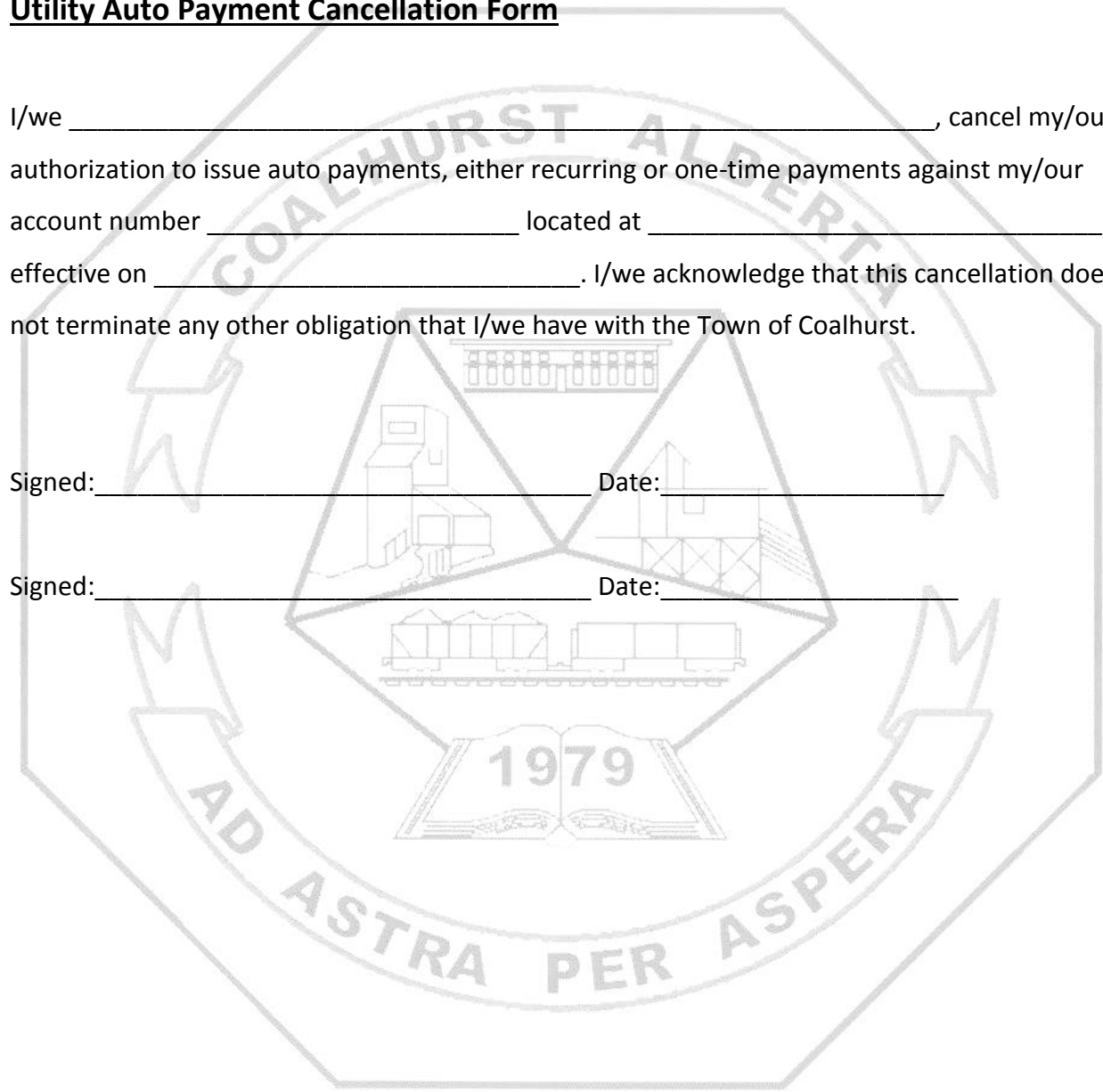


Utility Auto Payment Cancellation Form

I/we _____, cancel my/our authorization to issue auto payments, either recurring or one-time payments against my/our account number _____ located at _____, effective on _____. I/we acknowledge that this cancellation does not terminate any other obligation that I/we have with the Town of Coalhurst.

Signed: _____ Date: _____

Signed: _____ Date: _____



The personal information collected on this form will be used for the purpose of administering the Automatic Withdrawal Plan. It is collected under the authority of The Municipal Government Act, Section 340(2), and is protected under the provision of the Freedom of Information and Protection of Privacy Act.

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