

6300 Hammond Bay Rd. Tel: 250-390-4111

Nanaimo, B.C V9T 6N2 Toll Free in BC 1-877-607-4111 Fax: 250-390-6572

## **CHANGE/TERMINATION FORM FOR** PRE-AUTHORIZED BANK WITHDRAWAL FOR UTILITY USER FEE ACCOUNT PAYMENTS

## Please print

Service Location A	Address				
Last Name	First Name			Customer Account Number	
Mailing Address in	f different from S	ervice Address:			
City	Province/State		Postal	Code/ZIP	Daytime Tel No.
		NEW INFORMATION	ON IN THE S	ECTION BI	ELOW
Street Address of I	Banking Institution	on			
City	Provii		Postal Code		
Bank Account Nui	mber				
Institution No.	Io. Transit No. Account Number				
CHANGES TO BA	NKING INFOR	RMATION CAN ON ORIGINAL APPI		E UNDER 1	THE SIGNATURE OF
Please attach a v	voided cheque if	making changes to	your banking	information	•
I hereby request t	that the following	g changes be made to	my account in	formation:	
	Change my pre-	authorized payment is	nformation as	shown above	:
		rized debit (PAD) agranges have been mad		by me will r	emain in full force
Date:	Signature:				
Termir	nate pre-authorize	OR ed withdrawal for acco	ount payment	effective	
Date:	Signature:				

Please mail this form to the address noted above OR return by fax to (250) 390-6572.