FINANCE DEPARTMENT 750 17th Street West Vancouver BC V7V 3T3 t: 604-925-7032 f: 604-925-7034 e: taxinfo@westvancouver.ca



AUTOMATIC WITHDRAWAL CANCELLATION FORM

To cancel the pre-authorized tax and/or utility auto-debit withdrawals, please complete the form below and return it signed to the Finance Department using the contact information above.

Agreement Holder:	
Property Address:	West Vancouver B
Telephone:	Email:
	g accounts below, I/we do hereby authorize the Distr tic withdrawals for the following accounts:
(Tax) Folio Number:	Effective Date:
Utility Account Number:	Effective Date:
Reason for cancellation:	
If your property has been sold and if a please provide the District with the follow	refund is to be allocated back to the agreement holdering information:
Mail credit to this address:	
Closing Date of Sale:	Law Firm/Notary Public:
Attach a copy of the Statement of Ac	justments.
Signature of Agreement Holder:	
	Date:

Freedom of Information and Protection of Privacy Act Notice: Information collected on this form, or provided with this form, is collected and protected in accordance with the Freedom of Information and Privacy Act, and will be used for the purposes of Financial Services program administration. Questions regarding the collection/use of this information should be directed to the Information and Privacy Officer at 604-925-7019.

DOC#509794

