



844 Centre Street Box 370  
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## Cancellation Notice

### Pre-Authorized Debit Payments

**To: Town of Carstairs**

I/We, \_\_\_\_\_, cancel my/our  
authorization to issue pre-authorized debits against my/our account number  
\_\_\_\_\_ effective on \_\_\_\_\_, 20\_\_\_\_. I/We  
acknowledge that this cancellation does not terminate any other obligation that  
I/We may have with the Town of Carstairs.

**Customer Utility Account #** \_\_\_\_\_

**and/or**

**Customer Tax Roll #** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signed:** \_\_\_\_\_

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 insure the payment will not be processed.

