

PRE-AUTHORIZED PAYMENT MODIFICATION

Folio No: _____

Utility Account No: _____

Civic Address: _____ Effective Date: _____

Registered Owner(s): _____ / _____

Cancellation: *(provide brief explanation)*

Complete this section if property sold:

a) Seller's Lawyer / Notary:

b) Completion Date:

c) Instalment Adjustment Amount:

Change in Payment: *(provide brief explanation)*

Signature(s) for Cancellation/Change:

 Registered Owner's Signature

 Registered Owner's Signature

 Date Signed

<i>For Office Use Only</i>		Entered By	Date
Change taken by: _____ <i>(please print name)</i>	Tax Prepayment Plan – 15 th		
Date: _____	Utility Billing EPP – 25 th		
	Utility Billing Auto-Debit Plan		



Finance Department - Revenue Services

8550 Young Road, Chilliwack BC V2P 8A4

Website: <http://chilliwack.com/finance>

Tel: (604) 792-9498

Fax: (604) 793-2829

Email: taxes@chilliwack.com