

## 5012 - 48 Avenue, Sylvan Lake, AB T4S 1G6 P: 403 887 2141 F: 403 887 3660 Email: ut@sylvanlake.ca BANK ACCOUNT UPDATE UTILITIES

| Date:  |                                       | Utility Ac              | count:  |  |
|--|---------------------------------------|-------------------------|---|--|
| Name:  |                                       |                         |   |  |
| Municipal Address:   |                                       |                         |   |  |
| Please change my utility monthly payme   | ent plan bank information             | effective:              |   |  |
| Bank:  | Branch:                               | Acc                     | ount:   |  |
|  |                                       |                         |   |  |
| Home Owner (Print and Sign)  |                                       |                         |   |  |
| Account Name:  | · · · · · · · · · · · · · · · · · · · |                         | _   |  |
| (Please attach a copy of the cheque) E   | Intered By:                           | Date:                   | TaxRoll:  |  |
|  |                                       |                         |   |  |
| The personal information on this form is of Bank Account Information and is protected please contact the Utilities Department of | ed by the FOIP Act. If you            | ı have any questions or | ne Freedom of Informatio<br>concerns about the collec | n Act for the purpose of updating stion and use of this information, |
|  |                                       |                         | T F   | ) - 11 <i>11</i>   |

Tax Roll#