



AUTOMATIC WITHDRAWAL CHANGE FORM

To make an adjustment to the automatic 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 BC

Phone: _____ Email: _____

(Tax) Folio Number: _____ Utility Account Number: _____

CHANGE BANK ACCOUNT INFORMATION:

As the agreement holder of the account(s) above, I hereby authorize the District of West Vancouver to change my bank account information to the following account:

Attach a VOID cheque with the new bank account information.

CHANGE MONTHLY TAX PAYMENT AMOUNT:

As the agreement holder of the pre-authorized tax payment plan for the folio number mentioned above I hereby authorize the District of West Vancouver to adjust my monthly pre-authorized tax payment plan deductions to _____ per month commencing on the 1st of _____.

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.

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