

**Cancellation Form for Pre-Authorized Payments for Bi-Monthly Utility Bills**

Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

7-Digit Water Account Number: \_\_\_\_\_ Telephone: \_\_\_\_\_

Financial Institution Name: \_\_\_\_\_ Branch Location: \_\_\_\_\_

I/We \_\_\_\_\_, cancel my/our authorization to issue

\_\_\_ Personal or \_\_\_ Business Pre-Authorized debits on my Utility Bill Account effective

\_\_\_\_\_. I/We acknowledge that this cancellation does not terminate any other obligation that

I/we may have with the Payee.

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

The personal information requested on this form is being collected under *The Local Authority Freedom of Information and Protection of Privacy Act*. Personal information will be collected, used and disclosed only to confirm identity or contact information within the City of Yorkton, or if required to submit to a debt collector. If you have any questions about the collection, use, and disclosure of your personal information in this process, please contact the City Clerk for the City of Yorkton at (306) 786-1717.