



**TOWN OF VIEW ROYAL
PRE-AUTHORIZED PROPERTY TAX PAYMENT
CANCELLATION NOTICE**

REGISTERED OWNERS: _____ Folio No. _____

_____ Phone No: _____

CIVIC ADDRESS: _____

I/We _____, cancel
(Payor name)

my/our authorization to issue pre-authorized debits in the amount of \$_____ against my/our
account number _____ effective on _____. I/We
(Date)

acknowledge that this cancellation does not terminate any other obligation that I/we may have with the
payee.

SIGNATURES _____ DATE: _____

_____ DATE: _____

***Where the Payor's account agreement requires the signature of two or more signatures, the
signatures of all such person are required for the purpose of this Cancellation Notice.***