

PRE-AUTHORIZED DEBIT (PAD) CANCELLATION FORM

☐ Property Tax

□ Water

Return Completed PAD Cancellation Form by mail, email or fax to:

King Township 2585 King Road King City, Ontario Canada, ON L7B 1A1

Email: pad@king.ca Phone: 905.833.5321 Fax: 905.833.2300 Website: www.king.ca

Property Tax – P	lan er	nrolle	ed:															
☐ Monthly Pla		☐ Due Date Plan (per scheduled due date)																
Tax Roll No	0	0	0	-				-						-	0	0	0	0
Water – Due Dat	e Pla	n (pe	r sche	edule	d due	date	only	ı):	•			•	•					
Water Accoun	nt#									•								
Customer Inform	natior	ı (All	fields	are i	mand	atory	/):											
Owner Name(s):																		
Property Address	 5:																	_
Street:		Town:																
Postal Code:			Email:															
Telephone:																		
Cancellation Rea	son:																	
☐ Property So	old																	
□ Other																		
I/We, the Payor(s	s), car	ncel r	ny/ou	ır aut	horiza	ation	to iss	sue pr	e-aut	horiz	ed de	ebits 1	for Ta	x and	l/or W	/ater	_	
															MM – D			
Signature of Acc		Date:																
Signature of Acc (Where the Payor's such person are re	s acco	unt a	greem							or mor		ate: ning a	 uthori	ties, t	he sigi	nature	es of a	_ II
Office Use Only																		
☐ Remove fro											e Per							
☐ Remove Bank Info (Customer Maintenance)										emov	e PA[) Info	(Roll	Mair	ntenar	nce)		