NOTIFICATION TO CHANGE BANK ACCOUNT INFORMATION

Please change the bank account information for my pre-authorized debit payments	
for my/our Tax Roll Account # and/or for my/our Utility Account #	
See attached VOID cheque for new bar 20	nking information effective,
Bank Account Holder Name (<i>Please P</i>	rint)
Signature	Phone #

The information on this form is collected under the provisions of section 33(c) of the *Freedom* of *Information and Protection of Privacy Act (FOIP)* and is used solely for purposes of administering the Town of Sundre Pre-authorized Debit accounts. If you have any questions about the use of your personal information provided on this form please contact the Town of Sundre FOIP Co-ordinator at (403) 638-3551.