



**Utilities  
Pre-authorized Payment Program**

**Termination of Payment Program**

I/we wish to notify Chestermere Utilities Incorporated to terminate the monthly automated withdrawals for payment of utilities from the previously identified bank account, noting that transactions occur monthly on the 27<sup>th</sup> day of the month.

EFFECTIVE DATE OF CANCELLATION: \_\_\_\_\_

UTILITY ACCOUNT NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: RES. \_\_\_\_\_ CELL. \_\_\_\_\_

BUSINESS: \_\_\_\_\_ EMAIL: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Please forward this completed form to our Customer Service Agents at:

**In person or by mail:** #403, 320 West Creek Drive Chestermere, AB T1X 0P7  
**Email:** myaccount@cuinc.ca  
**Fax:** 587-349-3415