

Municipal District of Fairview No.136 Box 189 10957-91 Ave Fairview, AB T0H 1L0 Ph: 780-835-4903 Fax: 780-835-3131

EMAIL AUTHORIZATION FORM

Taxes/Utilities/Accounts Receivable/Email Notifications

The Municipal District of Fairview No. 136 (MD) is offering paperless billing for your Taxes, Utilities and Accounts Receivables. If interested, please complete the form and email it to mdinfo@mdfairview.ab.ca, deliver or mail it to the Municipal office, or fax it to 780-835-3131. Please contact the Municipality with any questions. Please note, every Notice or Bill is sent in an individual email.

APPLICANT INFORMATION (Please complete a separate form for each customer account ID)	
Last Name:	First Name:
Customer Account ID:	
Business Name (If applicable):	
Email Address:	
Postal Mailing Address:	
Phone Number(s):	
ACCOUNT INFORMATION	
☐ Property Tax Roll Number(s):	
☐Utility Account Number(s):	
□A/R (Gravel, Water Truck Fill, Tax Cert	ificates, etc.):
☐Email Distribution list – Stay informed	of important Municipal updates, road closures, outages etc.
By signing below, I signify that I, the sul	bscriber, have read and agree to the terms as follows:
 It is my responsibility to provide the any changes to the address. Non-rewaived as a result. 	mail, as a PDF attachment, to the email address listed above. the correct email address to the MD and to inform the MD in writing of receipt is not justification for late payment and penalties will not be
 I understand that I will no longer r 	receive a paper copy of my notice/bills.
Signature	Date
	the Email Authorization Form will be used to administer and manage the accounts receivable of the authorized under section 4(c) of the Protection of Privacy Act. For questions about the collection of or 780-835-4903.
Thank	you for your support in reducing waste!
OFFICE USE ONLY: A	uthorized By: Date: