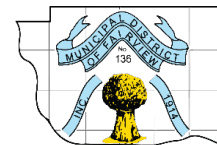


# Change of Banking Information Form

## Tax Instalment Payment Plan (TIPP)



Submit completed form to:

**Municipal District of Fairview No. 136**

10957 – 91 Avenue, PO Box 189

Fairview, Alberta

T0H 1L0

E-mail: [taxes@mdfairview.ab.ca](mailto:taxes@mdfairview.ab.ca)

Attention: Department of Corporate Services and Finance

Cancellation requests must be received at least fourteen (14) calendar days in advance of the next instalment payment date. Requests received after the fourteen (14) calendar days may result in that month's payment being withdrawn. **Please note: TIPP payments are not refundable or transferable.**

### Property and Contact Information

Tax Roll #:

First Name:

Last Name:

Business Name (if applicable):

Mailing Address:

Legal Land Description:

Phone Numbers:

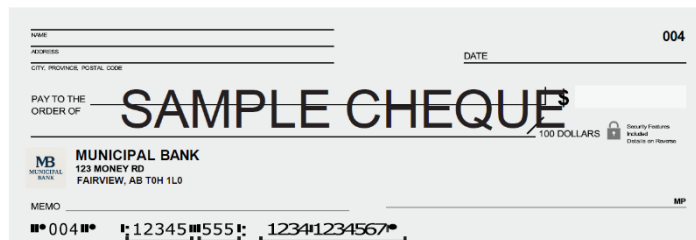
E-mail:

**Bank Account Information (Use the sample cheque to the right to help you fill in the fields below or attach a VOID cheque.)**

1. Branch/Transit number:

2. Financial Institution number:

3. Bank Account number:



### Signature

Account Holder Name:

Signature:

Date:

### MUNICIPAL OFFICE USE ONLY

Date Received:

Time:

Received By:

Date Made Inactive:

Made Inactive By: