The Corporation of the Town of Whitby
Tax Department
575 Rossland Road East
Whitby, ON L1N 2M8
www.whitby.ca
905-430-4304

BANKING INFORMATION CHANGE REQUEST FOR

Please change the banking information for my monthly Pre-Authorized Tax Payment as per the attached **VOID** cheque for:

_____
(PROPERTY LOCATION)

This change is effective: _____.
(Day/Month/Year)

ATTACH REPLACEMENT CHEQUE HERE OR
If you are submitting a pre-authorized banking form from your bank, please ensure the bank verification stamp is affixed to the form for chequing and or savings accounts.

Please remember that banking information changes must be received by the end of the month prior to the month that you want the change(s) to take effect. These changes must be in writing.

Date Requested: _____

Signed: _____

Print Name: _____

Roll No.																				
																0	**0**	**0**	**0**

10/06/17