

10125 100 Avenue E: info@morinville.ca

## **Tax/Utility Change** of Information Form

Email to: tax-utilities@morinville.ca

ACCOUNT INFORMATION							
<b>NOTE</b> : Alberta Land Titles require address changes for all Tax Rolls. For more information, visit: <a href="https://www.servicealberta.gov.ab.ca">www.servicealberta.gov.ab.ca</a>							
TAX ROLL:			UTILITY ACCOUNT:				
FIRST NAME:			LAST NAME:				
REQUEST TO CHANGE (check all that apply):							
o EMAIL	O PHONE NUMBER	0 1	MAILING ADDRESS	O BANKING INFORMATION		O DELIVERY METHOD	
CHANGE OF INFORMATION							
NEW MAILING ADDRESS:			TOWN/CITY:			PROVINCE:	
POSTAL CODE:			EMAIL ADDRESS:				
PHONE NUMBER: ADI			L PHONE NUMBER: EFFECTIVE (r			nm/dd/yyyy):	
PRINT NAME:			AUTHORIZED SIGNATURE:				
PREFERRED BILLING DELIVERY METHOD							
○ EMAIL ○ SERVICE ADDRE			SS O NEW MAILING ADDRESS				
PREAUTHORIZED PAYMENT WITHDRAWAL CHANGES							
<ul> <li>I have attached a cheque marked "VOID" or bank-preauthorized payment document to this application</li> </ul>							
AUTHORIZATION							
The owner(s) of the above service address understand that I/we are responsible for payment of the utility bills. Non-payment of the utility bill will result in either disconnection and/or transfer of the outstanding balance to the tax account pursuant to Morinville Bylaws.							
OWNER NAME (please print):		OWNER	OWNER SIGNATURE:		DA	ATE (mm/dd/yyyy):	
ADDITIONAL OWNER NAME (please print):  A		ADDITIO	ADDITIONAL OWNER SIGNATURE:		DA	ATE (mm/dd/yyyy):	
FOR OFFICE USE ONLY							
PROCESSED BY:			INITIAL:		DATE (mm/de	d/yyyy):	

Updated March 2025