

Pre-Authorized Payment Plan Cancellation

Please complete this form if you wish to cancel your Pre-Authorized Payment Plan.

Once your form is complete, please send to kpeterston@lvtownship.ca

I would like to cancel the following PAP plan: *

Tax - Installment Plan

Tax - Monthly Plan

Water - Installment

Water - Monthly

First Name *

Last Name *

Email Address *

Phone Number *

Property Address *

Please enter your roll number *

Water Account Number

I would like the effective cancellation date to be: 

What is the reason for cancelling? *

Authorized Signature 1 * 

Name of Authorized Signature 1 *

Authorized Signature 2 (if required) ?

Name of Authorized Signature 2 (if required)

Formally signed on *

Thank You

Please wait 10 business days while we review your cancellation submission. We will be in contact with you once the cancellation is processed and confirmed.

Thank You

Change the text for this message.