

Solid Waste Signoff Form

Utility Account Number

Reason for Signoff

- ☐ Tenant Move-Out
- ☐ Unoccupied
- ☐ Property Sold
- ☐ No Dwelling

Forwarding Address

First or Given Name(s)

Last Name

Primary Phone Number Alternate Phone Number

Current Mailing Address

Postal Code

E-mail Address

PLEASE NOTE: Sign off will be the later of the registered sign off; sign on of the tenant; or the land title property transfer.

I hereby make application to Lac Ste. Anne County for deactivation of my Transfer Station Utility Account.

☐ I am the registered account holder indicated above and I agree to these terms.

Signature

Date

To sign off your transfer station cards, please submit this completed, signed form to Lac Ste. Anne County at the address indicated below.

Your personal Information is being collected under the authority of section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act, and will be used for the provision of utility services and the collection of utility charges. The personal information provided will be treated in accordance with the privacy protection provisions of Part 2 of the Act.

If you have any questions about the collection of your personal information, contact the County FOIP Coordinator at the address indicated below.

OFFICE USE ONLY
Residence Utility # _____