

**Vivian Bloom**  
**Mayor**



**Tel: 613-338-2811 or**  
**Toll Free 877-338-2818**  
**Fax: 613-338-3292**

**Pat Pilgrim**  
**CAO / Clerk**

**#33011 Hwy 62, P.O Box 130**  
**Maynooth, Ontario, K0L 2S0**

**Email:**  
**receivables@hastingshighlands.ca**

**Property Roll Credit Transfer Request**

**Date:** \_\_\_\_\_

I \_\_\_\_\_ hereby authorize the transfer of credit in the amount of \$ \_\_\_\_\_ from,

**Roll #** \_\_\_\_\_ to be directed to;

**Roll #** \_\_\_\_\_ \$ \_\_\_\_\_

**Roll #** \_\_\_\_\_ \$ \_\_\_\_\_

**Roll #** \_\_\_\_\_ \$ \_\_\_\_\_

I understand this transfer of credit will be processed in accordance with the Municipalities Accounts Payable Schedule. I will be mailed a copy of the transaction for my personal records. Any outstanding balance(s) will be my responsibility.

Please forward the receipt to the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**All Owners Signature:** \_\_\_\_\_

**Staff Notes:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_