

Go Paperless for Utilities

E-BILLING SIGN UP

Account Holder Name:	
Contact Name (if different from above):	
Address:	Province:
Civic Address:	Postal Code:
City:	Phone:
Email Address:	
Utility Account Number(s):	
 address listed above. It is the subscribers' responsibility to provide the Mackenzie County, in writing, of any changes to late payment and penalties will not be waive. Once you agree to the terms and conditions of notice/bill. 	this service, you will no longer receive a paper copy of your as & conditions above and I acknowledge that the
Account Holder Signature:	Date:
☐ I would be interested in signing up for pre- required.	-authorized payments, please send me the form
For Office Use Only:	
Completed By:	Date:
Updated By:	Date:

The personal information on this form is collected in accordance with section 33 of the Freedom of Information and Protection of Privacy (FOIP) Act for the purpose of maintaining the tax roll database, utility accounts and other municipal purposes. If you have any questions regarding the collection, use or disclosure of this information, please contact the FOIP Coordinator at (780) 927-3718.

