



REFUND/TRANSFER FUNDS REQUEST

ACCOUNT NO: _____

NAME ON ACCOUNT: _____
LAST NAME FIRST NAME INITIAL

SERVICE ADDRESS: _____
BB: _____

EMAIL ADDRESS: _____

TELEPHONE NO: HOME: _____ CELL: _____
WORK: _____
(IF APPLICABLE)

ACCOUNT TYPE: DOMESTIC ☐ COMMERCIAL ☐

AMOUNT: _____

REFUND

TRANSFER CREDIT ☐

ACCOUNT NO: _____

CHEQUE <input type="checkbox"/>	DIRECT DEPOSIT <input type="checkbox"/>
MAILING ADDRESS (Payee): _____ _____ _____	BANK: _____ BRANCH: _____ ACCOUNT TYPE: _____ TRANSIT # _____ BANK CODE: _____

This is due to the following: -
(please indicate below)

- ☐ No longer interested in obtaining the service
- ☐ Internal/in-house (laying of pipe from meter to stove etc.) would be done privately
- ☐ Made the wrong application – New Service instead of Reinstall Meter etc.
- ☐ Gas is not accessible as per Drawing and Records Department
- ☐ Overpaid account

APPLICANT: _____ DATE: _____

NAT. REG. NO. _____

VERIFIED: _____ DATE: _____