

## TAX INSTALLMENT PAYMENT PLAN SERVICE CANCELLATION FORM

(Please complete a form for each property that is to be cancelled from the program)

To: City of Regina, Property Taxation Office

Re: Tax Installment Payment Plan Service (TIPPS) Program

Property address: \_\_\_\_\_

Registered owner: \_\_\_\_\_

Property account ID: \_\_\_\_\_

I understand cancellation requests must be received **3 business days** before the end of the month in order to be processed before the next withdrawal.

This request is to cancel from the TIPPS program after the \_\_\_\_\_ withdrawal.  
(print month)

Applicant's name (please print): \_\_\_\_\_

Authorized signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the applicant is not the registered owner, relationship to owner: \_\_\_\_\_

Mailing address (if different from above): \_\_\_\_\_

Daytime tel: \_\_\_\_\_

For accounts not on the TIPPS program, all unpaid taxes become due, payable and subject to penalties in accordance with *Regina Administration Bylaw No. 2003-69*.

**NOTE: Cancellations will not be processed without a signature.**

For office use Received by : _____
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