



## Property Revenue Services

# Request to Terminate Landlord Service Agreement Form

<b>Owner Information</b>	
<b>Landlord Name:</b> (Please print – ONE NAME ONLY)	
<b>Mailing Address:</b>	
<b>Daytime Phone Number:</b> <input type="checkbox"/> Home <input type="checkbox"/> Bus <input type="checkbox"/> Cell	
<b>Property Address:</b>	<b>Property Account Number (12 digits):</b>  -
<i>(If there are multiple properties, please list down the additional Property Addresses and Property Account Numbers on the next page)</i>	
<b>Termination Date</b> (i.e., the date on which you are no longer responsible for the property):	

Please cancel the Landlord Agreement I currently have with the City of Regina, Property Revenue Services, for the property or properties referenced above. I understand that my Agreement with the City of Regina, Property Revenue Services will terminate only when this Request to Terminate form is received by Property Revenue Services signed and in full.

**Landlord Signature (required):** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Note: If you are currently in billing at the referenced address(es), please contact Service Regina at 306-777-7000 to be moved out of billing.*

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**Return completed form in one of the following ways:**

**Mail:** City of Regina, Property Revenue Services  
2476 Victoria Avenue PO Box 1790  
Regina, SK. S4P

**Fax:** 306-777-6814

**Email:** [utilitybilling@regina.ca](mailto:utilitybilling@regina.ca)

## ADDITIONAL PROPERTY ADDRESS(ES)

Use this additional page to list down all your other property addresses, and then sign.

Property Acct. No. (12 digits): - Property Address: _____ _____ Termination Date: _____	Property Acct. No. (12 digits): - Property Address: _____ _____ Termination Date: _____
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Property Acct. No. (12 digits): - Property Address: _____ _____ Termination Date: _____	Property Acct. No. (12 digits): - Property Address: _____ _____ Termination Date: _____

Landlord Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_