



Condo Fee Payment: Cancellation

This form must be received by the management office at least 7 days in advance of the next payment that is due. The Payee is not responsible for cancellations that cannot be processed due to receipt of notification that is less than 7 days.

Payor information (please print)

| | | |
|-----------------|-------------|--------------------------|
| Last Name | First Name | |
| Mailing Address | | |
| City/Town | Postal Code | Daytime Telephone Number |

Part 1: To: Waterloo Standard Condominium Corporation No. 492

Unit # _____, Address _____
(complete only if different from address provided above)

Part 2: I/We pay the monthly fee by: cheque pre-authorized debit

Part 3: The reason for cancellation is:

- I/We have sold the unit and the closing date is _____
- Other _____

I/We acknowledge that this cancellation does not terminate any other obligation that I/We may have with the Payee.

Signature of Payor(s): _____

Date: _____