

Standpipe Key Cancellation Form

Dear Sir/Madam

I _____ from (Company) _____

Assessment number _____

Request Singleton Council to cancel my Standpipe account for Key Number _____

Effective date _____

Key **Returned** (please tick) YES NO

Please note, the standpipe key must be returned to receive a refund of the key deposit.

Signature: _____ Date: _____

Office Use Only

Rates Department :

Processed By: Date:

Copy given to Accounts Receivable: