

## MOVE OUT FORM

Use this form to submit your move-out information. Please make sure to fill in all information.

### Current Service Address

Current Service Address :

### Move Out Request Information

Are you an Owner or Tenant?

Owner

Tenant

Move-out Date :

(It must be at least 3 days in the future, not including holidays and weekends)

### Mailing Address – As of Move-Out Date

Street Address :

Unit# :

City :

Province/State :

Postal/Zip Code :

### Account Information

Account# :

Name of Authorized Person :

(Individual must be a name on the account)

Business Name (if applicable) :

Phone# :

Work Phone# :

Cell Phone# :

I confirm that I am the account holder acknowledged above and that the information provided in this form is true, complete and accurate.

Today's Date :

Signature :

#### **Please mail or drop off at:**

Mail to: Niagara Peninsula Energy

7447 Pin Oak Drive

P.O. Box 120

Niagara Falls, ON L2E 6S9

E-mail to: [info@npei.ca](mailto:info@npei.ca)