

Cancellation Form



Premises Particulars

Complex Name:

Vacating Date:

Unit:

Personal Particulars

Surname:

Title:

Full Name(s):

Initials:

Your ID Number:

Cell Phone Number:

Work Telephone Number:

Additional Cell Phone:

Fax Number:

Email Address:

Account Particulars:

Account Holder Name:

Bank:

Branch Name:

Account Number:

Branch Code:

Account Type: Cheque: Savings: (Please mark applicable block)

Refunds: All deposits will be refundable together with the remaining credits on the meter, less a R60.00 admin fee when you vacate the premises where the smart meter is located. Please be advised that the refund process may take up to 30 days.

Please Note: Should any amount(s) be outstanding on your account, these amounts will be deducted from the deposit.

Date:	d	d	m	m	y	y	y	y	Your Signature:
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For Office Use Only:

Deposit Value:

Credits Remaining:

SUB TOTAL:

Less Admin Fee:

Less Unpaid:

TOTAL:

Date:	d	d	m	m	y	y	y	y	ismrt! Signature:	Name:
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Date:	d	d	m	m	y	y	y	y	Accounts Signature:	Name:
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