



# EMAILING AUTHORIZATION

**MAILING ADDRESS:**  
Town of Rocky Mountain House  
PO Box 1509  
Rocky Mountain House, AB T4T 1B2

**STREET ADDRESS:**  
5116 – 50 Ave  
Rocky Mountain House  
Monday to Friday  
8:30 a.m. – 4:30 p.m.

**PHONE:** 403-845-2866  
**FAX:** 403-845-3230  
**EMAIL:**  
[propertytaxes@trmh.ca](mailto:propertytaxes@trmh.ca)  
[utilities@trmh.ca](mailto:utilities@trmh.ca)

Please indicate which account documents are to be emailed:

- Property Tax Account Documents     Utility Account Documents

EFFECTIVE DATE:	
SERVICE ADDRESS:	
PROPERTY TAX ROLL NO.:	UTILITY ACCOUNT NO.:

*For new property owners/accounts, account numbers will be added once they are assigned.*

## APPLICANT (1) INFORMATION

NAME:	
BUSINESS NAME (IF APPLICABLE):	
EMAIL ADDRESS:	PHONE NUMBER:

## APPLICANT (2) INFORMATION

NAME:	
BUSINESS NAME (IF APPLICABLE):	
EMAIL ADDRESS:	PHONE NUMBER:

If there are more than two people on title, please complete additional form(s).

Initials	TERMS & CONDITIONS
	I consent that the notices, bills, invoices and communications for my above accounts will be provided by email, to the email address listed above, and I will no longer receive a paper copy.
	I understand that it is my responsibility to provide the correct email address and to inform the Town of Rocky Mountain House in writing of any changes to this email address.
	I understand that non-receipt of my notices, bills or invoices is not justification for late payment and penalties will not be waived as a result.

**Note:** Please add [utilities@trmh.ca](mailto:utilities@trmh.ca), [propertytaxes@trmh.ca](mailto:propertytaxes@trmh.ca), and [noreply@trmh.ca](mailto:noreply@trmh.ca) as safe senders to ensure the documents reach your inbox.

I have read, initialed, understand and consent to the terms and conditions of the Emailing Authorization form as stated above and acknowledge that the information provided on this form is complete and accurate.

Signature \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>Office Use Only</b>	Copy given to: <input type="checkbox"/> Property Taxes <input type="checkbox"/> Utilities <input type="checkbox"/> AR
Entered by _____	Date _____

Personal information that is collected as part of this form will be used for purposes related to the administration of Property Assessment/Taxation and Utility services. Collection is authorized under section 4(c) of the *Protection of Privacy Act (POPA)* and is managed and protected in accordance with the Act. Questions about the collection, use or disclosure of your personal information may be directed to the Access and Privacy Officer at 403-845-2866 or email [accessandprivacy@trmh.ca](mailto:accessandprivacy@trmh.ca).