



Landlord Cancellation Agreement

I, _____ (First and Last name) on behalf of _____ (Customer of record/Responsible party) request that the following address(es), to be removed to my current Landlord Automatic Transfer of Service Agreement.

Address(es)

Effective date(s)

MM/DD/YYYY

MM/DD/YYYY

Mail to:

APS Landlord Services
PO Box 53933 Mail Sta. 3204
Phoenix, AZ 85072-3933

Email to: businesscare@aps.com

Customer signature _____

Date

MM/DD/YYYY

Customer's phone number

For APS Use Only: Reference # _____