



Pre-Authorized Payment Plan Agreement

In order to enroll in the Pre-Authorized Payment Plan the following criteria must be met:

1. All arrears must be paid in full prior to application APPROVAL
2. Complete the agreement and return it to the Municipal Office
3. Attach a "VOID" cheque

TAX PLAN

INSTALLMENT – Payments are made on the due dates

MONTHLY PAYMENT - Commences in January of each year, with twelve (12) equalized payments based on an estimate of the current year's levy and adjusted when the taxes are levied, in accordance with policy FIN-10 Pre-Authorized Payment

WATER UTILITY PLAN

INSTALLMENT – Payments are made on the due dates.

MONTHLY PAYMENT - Commences in March of each year, with ten (10) equalized payments based on the current year's billing and adjusted in the event of a rate change, in accordance with policy FIN-10 Pre-Authorized Payment.

PLEASE CHECK OFF WHICH PLAN YOU WISH TO PARTICIPATE IN:

TAXES - INSTALLMENT	<input type="checkbox"/>	WATER - INSTALLMENT	<input type="checkbox"/>
TAXES - MONTHLY	<input type="checkbox"/>	WATER - MONTHLY	<input type="checkbox"/>

NAME (s): _____

PROPERTY ADDRESS: _____

ROLL NUMBER: 4766 _____

WATER ACCOUNT NO.: _____

PHONE (H): _____ WORK/CELL: _____

EMAIL ADDRESS: _____

BANK NAME: _____

INSTITUTION NO: _____ TRANSIT NO: _____

ACCOUNT NO: _____

I/We hereby authorize The Township of Laurentian Valley to debit my/our bank account for the payment of my/our realty taxes and/or utility billing in electronic form from the Banking Institution named above. This authorization may be cancelled by submitting a PAP cancellation form fifteen (15) days prior to withdrawal date.

I/We hereby authorize The Township of Laurentian Valley to increase/decrease the amount in accordance with our Municipal By-law as amended.

I/We will inform The Township of Laurentian Valley in writing of any change in the account information provided above.

The Township of Laurentian Valley reserves the right to remove the account from the plan if payments are in default.

NAME: _____ SIGNATURE: _____

Please print

NAME: _____ SIGNATURE: _____

Please print

PLEASE ENCLOSE A CHEQUE MARKED "VOID"

"The information collected on this form is being collected under the authority of Section 342 of the Municipal Act, 2001 as amended and will be used for the sole purpose of applying pre-authorized payments to the relevant account

OFFICE USE ONLY

Received Date: _____ Accepted By: _____

Entered Date: _____ Entered By: _____