



## Pre-Authorized Payment Enrollment Form

Applicant Information	
Customer Category ( <i>select only one box; separate forms are required for each account</i> ):	
<input type="checkbox"/> Property Tax Account <input type="checkbox"/> Water Utility Account	
First Name:	Last Name:
or Company Name:	
Assessment Account Number (8 digits – as it appears on your tax bill):	
Water Account Number (8 digits – as it appears on your water invoice):	
Phone:	Email:
<input type="checkbox"/> Please check here if you would like to switch to paperless billing via email	

Banking Information ( <i>attached cheque marked "VOID" or a pre-authorized payment form from your financial institution</i> )	
Name of Financial Institution:	
Financial Institution Number (3 digits):	Branch Transit Number (5 digits):
Bank Account Number:	
<i>Select one:</i> <input type="checkbox"/> Chequing or <input type="checkbox"/> Savings	

Pre-Authorized Payment Details ( <i>select one only</i> )	
<input type="checkbox"/> 1 <sup>st</sup> day of each month	
Enter dollar amount of payment: \$	
Starting no earlier than the 1 <sup>st</sup> day of ( <i>month</i> ):	
<i>Please note monthly interest will be charged on any outstanding balances during the year</i>	
<input type="checkbox"/> 15 <sup>th</sup> day of each month	
Enter dollar amount of payment: \$	
Starting no earlier than the 15 <sup>th</sup> day of ( <i>month</i> ):	
<i>Please note monthly interest will be charged on any outstanding balances during the year</i>	
<input type="checkbox"/> On billing due dates (annually for tax bills; quarterly for water bills)	
<i>Please note that tax and/or water accounts must have a zero balance prior to selecting this option. Contact Municipal staff to arrange prior to enrollment.</i>	

Pre-Authorized Payment (PAP) Agreement
<p>I/We authorize the Municipality of the County of Victoria and the financial institution designated above to begin deductions as per my/our instructions specified above, for regular recurring payments and/or one-time payments from time to time, for payment of all charges arising under my/our property tax account or water utility account.</p> <p>The Municipality of the County of Victoria will obtain my/our authorization for any other one-time or sporadic debits.</p> <p>This authority is to remain in effect until the Municipality of the County of Victoria has received written notification from me/us of a change or termination. This notification must be received at the municipal office in Baddeck, NS, at least ten (10) business days before the next debit is</p>



## Pre-Authorized Payment Enrollment Form

I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAP that is not authorized or is not consistent with this PAP Agreement. To obtain more information on my/our recourse rights, I/we may contact my/our financial institution or visit [www.payments.ca](http://www.payments.ca).

### Signature

I/We hereby authorize the Municipality of the County of Victoria and the financial institution indicated above to release funds for payment under the terms and conditions of this request and as indicated above.

I/We warrant and guarantee that all persons whose signatures are required to sign on this account have signed this agreement below

Signature of account holder: \_\_\_\_\_

Name (*please print*):

Date:

Signature of joint account holder (*if applicable*): \_\_\_\_\_

Name (*please print*):

Date:

### For Office Use Only

Application received by: \_\_\_\_\_

Date request received: \_\_\_\_\_

Date entered into Diamond: \_\_\_\_\_