TOWN OF VULCAN - TAX PRE-AUTHORIZED DEBIT AGREEMENT

5				
Payor's Name				
Roll Number			Phone Number	
Civic Address				
Mailing Address				
Email Address				
Payor's Financial Institution: For verification purposes, please enclose a personal cheque marked "void" or a Direct Debit Sheet which can be provided at your financial institution				
Name of Financial In				
Account	Number			
Financial Institution Number		Transit Number		
Previous Tax Levy: \$ Monthly Tax Payments (Tax Levy/12): \$				
PAD Category: These services are for (check one): Personal Business				
Payment Options (check one): Option #1 – 1st day of each month, beginning				
Date: Signature of Account Holder:				
Signature of Joint Account Holder (if applicable):				
Name(s) (Please Print):				
You have certain recourse rights if any debit does not comply with this agreement. You have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your recourse rights you may contact your financial institution or visit www.payments.ca.				
Town of Vulcan				

The personal information requested is being collected under the authority of the Freedom of the Information and Protection Privacy (FOIP) Act and is protected by FOIP Act. If you have any questions about the collection, contact the Privacy Coordinator at 403.485.2417

Email: admin@townofvulcan.ca

Tel: 403.485.2417

321 2nd Street South Vulcan, AB TOL 2B0