

Pre-Authorized Debit Agreement Utility Billing



You can sign up with The Town of White City (The Town) for Pre-Authorized Debit withdrawal for utility billing by completing this Pre-Authorized Debit Agreement (PAD Agreement) in full.

PLEASE PRINT CLEARLY

Utility Customer Information

Name(s) on Account: _____

Mailing Address: _____

Civic Address: _____

Phone Number: _____

Pre-Authorized Payment Plan (PPP)

By agreeing to the PPP option, you hereby authorized The Town, and the financial institution designated, to deduct payment of all charges arising under each Utility bill rendered, as the case may be, from the bank account specified. Payments shall be recurring in accordance with your billing interval and may be of variable amount. The entire bill amount is debited on the due date of the billing period.

Provide account information:

Utility Account Number (8 digits): _____

Type of Service: Personal Business

Bank Account Information

Please **attach a void cheque to this application** from the CHEQUING or SAVING account you wish to be debited AND complete the following banking information.

Name of Financial Institution: _____

Branch Address: _____

Branch Transit (5 digits): _____ Financial Institution Number (3 digits): _____

Bank Account Number: _____

Account Type: Chequing Saving

Is this a joint bank account? Yes No

I would like to apply for the Equalized Payment Plan (EPP) : Yes No

By selecting EPP you agree to pay your account in equalized payments, as calculated by each utility. EPP is available to residents who have signed up for PAD and have been at their service address for one year or more. EPP takes billing from the previous year and split it into eleven(11) equal payments with the twelfth(12th) payment being a recalculation month which would determine if more or less water was used than the previous year average resulting in an amount owing or a credit.

The recalculation month will be January of each year.

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The Town shall provide prior notice via your bill that a pre-authorized payment will be debited, the amount of the debit, and the date(s) of such debit. **By executing this agreement, you hereby agree to waive the Canadian Payment Association requirement for 10 day's notice that PPP is debited and the date of such debiting.**

You may revoke your authorization at any time, subject to providing notice of seven (7) days. Notice shall be in writing or by telephone. For more information on your right to cancel a PAD agreement, contact your financial institution or visit www.cdnpay.ca.

This PAD Agreement only applies to the method of payment between you and The Town and this PAD Agreement and any termination of this PAD Agreement does not have any effect whatsoever with respect to any contract for service between you and The Town.

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with the PAD agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.cdnpay.ca.

If funds are not available two (2) times during this agreement the PAD Agreement will be cancelled, and the resident will be responsible for paying their utility bill via alternate methods.

Signature of Account Holder: _____

Date: _____

Signature of Account Holder: _____

Date: _____

Sign up for E-Billing to reduce paper and postage costs!

The Town of White City will use reasonable means to protect the security and confidentiality of e-mail information sent and received. However, because of the risks associated with email communication, the municipality cannot guarantee the security and confidentiality of e-mail communication and will not be liable for improper disclosure of confidential information. For this reason, the customer must consent to the use of e-mail for delivery of municipal notices.

Consent to the use of e-mail for the delivery of municipal notice includes agreement with the following:

1. Failure to receive an e-mailed municipal notice does not release me from my responsibility to pay any charges specified on the notice, or any penalties which may be incurred by late payment.
2. I will inform the Town of White City of any change in my e-mail address (this includes moving out of White City) as soon as possible to prevent the misdirection of notices and reduce the risk of not receiving a notice.
3. I may withdraw from e-mail delivery at any time. To do so I will inform the Town of White City.

I acknowledge that I have read and fully understand this document and consent to the delivery of specific municipal notices from the Town of White City to me by e-mail.

Email Address: _____

Customer Signature

Date

For more information and any inquiries regarding your utility account, contact:

Town of White City

Ph: 306-781-2355 townoffice@whitecity.ca www.whitecity.ca

Form Updated August 16, 2024