

# Pre-Authorized Payment Plan



*Nestled In Nature*

**Municipality of West Grey**  
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## PRE-AUTHORIZED PAYMENTS

The Municipality of West Grey has a pre-authorized tax payment plan available for its ratepayers. If you are interested in this payment option, please complete the following application and return it to our office.

Also please note, in order to take advantage of this payment option, your account must be current and up-to-date. There can not be any outstanding amounts owing.

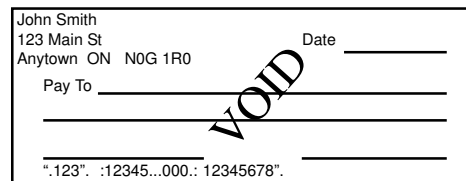
### HOW IT WORKS:

With your permission, your payments can be made automatically through your chequing account. Your payments are recorded automatically and individually on your bank statement or pass book.

### BENEFITS:

It's a modern, easy method to make those recurring bill payments without the inconvenience of cheque writing and the increasing cost of postage or that trip to pay the bill.

**NOTE:** Please attach a specimen of a voided cheque to the application.



**Payments will be withdrawn on the 15<sup>th</sup> of the month or around that date.**

## PRE-AUTHORIZED PAYMENT AUTHORIZATION FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov.: \_\_\_\_\_ PC: \_\_\_\_\_

Phone: Home \_\_\_\_\_

Work \_\_\_\_\_

### Tax Assessment Roll # of each property:

4205-

4205-

4205-

Type of Plan (Please indicate):

Tax:  Monthly (withdrawn 15<sup>th</sup> of month)

Quarterly (withdrawn 15<sup>th</sup> of month due)

Water Acc't #: \_\_\_\_\_

Water  (withdrawn 15<sup>th</sup> of month)

### DATE TO START :

Financial Institution: \_\_\_\_\_

Branch Address: \_\_\_\_\_

Bank Number: \_\_\_\_\_

Transit Number: \_\_\_\_\_

Chequing Account Number: \_\_\_\_\_

I/we, as the above account holder(s), do hereby authorize the Municipality of West Grey and my/our financial institution to debit my/our account for payment of taxes and/or water. This authorization may be cancelled at any time upon written notice by me/us. (Signatures are required on cheques issued against this account.)

\_\_\_\_\_  
(Signature)

Date: \_\_\_\_\_

Copy to Water Dept     Copy to Tax Dept