

**TAX INSTALLMENT PAYMENT PLAN
AUTHORIZATION FORM**

Summer Village of _____

Customer Information (please print clearly)

Roll Number: _____

Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone Number: _____

Bank Account Information: (please attach a void cheque)

Deposit Account Number: _____ Bank Transit Number: _____

Financial Institution Number: _____ Chequing: _____ Savings: _____

Financial Institution: Name: _____

Branch Address: _____

Pre-Authorized Debit (PAD) Details

You the Payor authorize the Summer Village of _____ to debit the bank account identified above for property tax payments on a monthly basis as per the Summer Village Bylaw. Each monthly payment will be debited from your bank account and applied directly to your tax account. Any returned items are subject to a \$25.00 service charge.

You the Payor may revoke your authorization at any time, subject to providing notice of 30 days. To obtain a sample cancellation form, or for more information on your right to cancel a PAD Agreement, contact your financial institution or visit www.cdnpay.ca.

Signature of Account Holder

Signature of Joint Account Holder

Name (Please print)

Name (Please Print)

Date

Date

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 this PAD Agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.cdnpay.ca

PLEASE SEE REVERSE SIDE OF THIS FORM

PLEASE NOTE:

1. For eligibility, all tax arrears must be paid in full.
2. Please attach one of your personal/business cheques marked VOID.
3. For a joint account, if more than one signature is required on cheques issued against the account; all depositors must sign this form.
4. Provision of the tax penalty and interest allowance by-laws shall NOT apply to installments paid under the Plan.
5. In the event that you change your bank account, a “sample” cheque of your new account must be forwarded to the tax department at least two weeks prior to your next payment.
6. In the event of a sale of the above noted property, it is your responsibility to inform your lawyer that you are presently on a monthly tax prepayment plan and notify the tax department at the S.V. Office to arrange for cancellation or transfer of the plan at least two weeks prior to your next payment.
7. If you, the property owner, fails to honor two consecutive monthly payments as agreed to in this authorization, the plan may be cancelled and all property taxes shall become due and payable and provisions of the tax penalty and incentive by-law shall apply.
8. This form must be completed and returned to:

Summer Villages Office
Box 100
Ma-Me-O Beach, AB T0C 1X0

by December 15th of the year prior to commencement of January 1st.