



PREAUTHORIZED DEBIT FORM APPLICATION
TAX INSTALLMENT PLAN
Town of Whitecourt
Box 509, 5004-52 Avenue
Whitecourt, Alberta T7S 1N6
Phone: 780-778-2273
Email: PropertyTax@whitecourt.ca

OWNER / APPLICANTS:

NAME:	DATE OF APPLICATION:
MAILING ADDRESS:	MUNICIPAL ADDRESS:
CITY:	ROLL NUMBER:
PROVINCE:	CURRENT TAXES:
POSTAL CODE:	PREAUTHORIZATION PAYMENT AMOUNT:

ATTACH CHEQUE MARKED VOID
OR
EFT SLIP FROM BANKING INSTITUTE

If submitting electronically, please attach a scan of a VOID Cheque or EFT Slip from your financial institution.

Owner Signature:

Town Representative:

Residential Phone Number:

Date:

Please see reverse for conditions for the Tax Installment Plan / Pre-Authorized Debit Form Application. This form must be returned to the Town of Whitecourt with a VOID cheque or EFT slip prior to December 31 annually to start the plan for the following year.

FOR ADMINISTRATIVE USE ONLY	Customer declined a copy <input type="checkbox"/>
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1. For payment under payable to the Town of Whitecourt, on the noted tax account:
 - For all taxes payable to the Town of Whitecourt, on the noted tax account;
 - In the amount of monthly payment shown below, on the 4th banking day of each month beginning on the date shown above.
 - Which amount may increase/decrease pursuant to the provisions of the Tax Installment.
2. A specimen Cheque for my/our account marked "VOID" or EFT Slip is attached to this Application /Pre-Authorized Debit Form.
3. This Authorized Debit may be cancelled or changed upon written notice by me/us no less than 14 days prior to the next due date. Withdrawal from the Tax Installment Payment Plan shall be subject to the provisions of the Tax Installment Payment Plan Bylaw.
4. I/we acknowledge that in the event any payment is not honored, penalties and bank charges will be applied and my/our participation in the Tax Installment Payment Plan may be cancelled, in accordance with the provisions of the Tax Installment Payment Plan Bylaw.
5. In the event of a sale of the above noted property, I/we will notify the Town of Whitecourt in writing not less than 14 days prior to the next due date, to arrange cancellation of my/our payment, and I/we will advise the purchaser of their option to, upon application, make payments be pre-authorized debit under the Tax Installment Payment Plan.
6. In the event I/we change my/our bank account, I/we will notify the Town of Whitecourt in writing and complete a new Pre-Authorized Debit Form not less than 14 days prior to the next due date and provide a current VOID cheque or EFT slip.
7. Any delivery of this Application/Pre-Authorized Debit Form to the Town of Whitecourt constitutes delivery by me/us.
8. All persons, whose signatures are required to sign on the bank account listed below, have signed their agreement below.
9. Nothing in this Application/Pre-Authorized Debit Form shall be interpreted to relieve the owner/applicant from the obligation to pay any taxes, including penalties, owing to the Town of Whitecourt or to pay any taxes, including penalties, owing to the Town of Whitecourt in the manner or on the date or dates for payment established by bylaw of the Town of Whitecourt.
10. By the copy of the Application/Preauthorized Debit Form being provided to the applicant/owner acknowledge notification of and agrees to abide by the Terms and Conditions of the Pre-Authorized Debit and Electronic Funds Transfer Service provided by the Town of Whitecourt Financial Institution.
11. 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 Pre-Authorized Debit Agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.cdnpay.ca.