

Pre-Authorized Payment Plans

OWNER INFORMATION Owners Name:_____ Property Address: Telephone Number: Tax Roll #_____ Utility Account # _____ Check which applies: TAX UTILITY Due Date Monthly (15th of each month) (Date due on bill) Installment (Quarterly) PAYOR FINANCIAL INSTITUTION INFORMATION (attach VOID cheque) Branch #:_____ Institution #:____ Account #:____ Name of Financial Institution:_____ Branch Address: I agree to participate in this Pre-Authorized Debit Plan for Property Taxes/Utilities and I authorize the payee (Town of Perth) to draw a debit in paper, electronic or other form for the purpose of making payment on my account indicated above at the Financial Institution listed. All returned payments are subject to a fee according to the Town of Perth's Fees and Charges Bylaw. See Full terms & Conditions at www.perth.ca Owner signature(s) ______ Date:_____