



Guelph/Eramosa
Township

The Corporation of the Township of
Guelph/Eramosa
**PRE-AUTHORIZED PAYMENT PLAN
AUTHORIZATION FORM**

Assessment Roll #: _____

Property Location: _____

Owner Name(s):

(1) _____ (2) _____

Telephone #:

Res. (_____) _____ Bus (_____) _____

I/We hereby authorize the Financial Institution shown on the attached cheque to debit my/our account as indicated above for all payments payable to the Corporation of the Township of Guelph/Eramosa for payment of my/our tax account for the amount specified. I/We ensure that the funds will be available each month to cover withdrawal and that insufficient funds will result in finance and penalty charges as applicable and possibly cancellation of my/our account. This treatment of each payment shall be the same if I/we had personally issued a cheque authorizing you to pay as indicated and to debit the amount specified to my/our account. This authority is to remain in effect until cancelled by either myself or the Township of Guelph/Eramosa by written notification and given a reasonable opportunity to act. Any delivery of this authorization to you constitutes delivery by me/us.

Type of Plan (Choose only one of the following options by checking the box)

MONTHLY

INSTALMENT DATE

Authorized Signature (1)

Date

Authorized Signature (2)

Date

If more than one signature is required for withdrawals against the account number shown on the attached cheque, all authorized signatures must be given.

Notice of Collection:

The collection of this information is being done under the authority of the *Municipal Act, 2001, S.O. 2001 c.25. Pursuant to Sections 317(1) and 317(3).* Should you have any questions about the collection or retention of this information, please contact Township Clerk at 856-9596 ext. 107.

ATTACH VOIDED CHEQUE HERE

Mail to: Township of Guelph/Eramosa
P.O. Box 700
Rockwood, ON N0B 2K0