



Township of Blandford-Blenheim

PRE-AUTHORIZED PAYMENT PLAN FOR PROPERTY TAXES

I/We hereby authorize the above Financial Institution to debit my/our account each month as indicated below for all payments, payable to the Corporation of the Township of Blandford-Blenheim.

I/We accept the terms and conditions, herein defined, and authorize the Township of Blandford-Blenheim to deduct payments from my/our 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 charges as applicable, and possibly cancellation of my/our enrollment in the payment plan.

This authority is to remain in effect until cancelled by either myself/us or the Township of Blandford-Blenheim by written notification. If not cancelled, it will remain in effect.

Full Name(s): _____

Municipal Address: _____

Phone Number(s): _____

Email Address: _____

Can we email your tax correspondence? YES NO

Payment Plan Option:
(Please select one ONLY)

(A) PAP 10 – Monthly Instalments (Jan-Oct)

(B) Quarterly – Four Instalments (Feb, May, Aug & Oct)

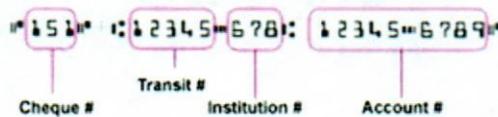
Financial Institution: _____

Bank Account Number: _____

Transit Number: _____

Institution Number: _____

Please attach a void cheque of bank form from your financial institution



Authorized Signature (1)

Authorized Signature (2)

Date

PLEASE EMAIL FORM TO kkoski@blandfordblenheim.ca or MAIL TO 47 Wilmot Street South Drumbo ON N0J 1G0

FOR OFFICE USE ONLY

EFFECTIVE DATE: _____ ROLL NO: 3245- _____

APPLICATION APPROVED: _____ Date: _____