

Box 69, Kitscoty, Alberta, T0B 2P0
 Phone (780)-846-2244 Fax (780) 846-2716
 Please complete the Pre-Authorized Debit (PAD) Plan agreement below.



TAX PAYMENT PLAN

I/we authorize County of Vermilion River and the financial institution designated (or any other financial institution I/We may authorize at any time) to begin deductions as per my/our instructions for monthly regular recurring payments and/or one-time payments from time to time, for payment of all property taxes including any local improvement levies arising under my/our County of Vermilion River Property Tax account(s). Regular monthly payments for the monthly amount calculated below will be debited to my/our specified account on the 15th day of each month and which amount may increase/decrease in July and September to the amount shown on the annual Combined Property Assessment and Tax Notice to reflect monthly adjustments required on the new balance. In the event that the 15th is a holiday, the debit will come out on the next working day. County of Vermilion River will provide 10 days written notice of any required adjustment to the amount of each regular debit. County of Vermilion River will obtain my/our authorization for any other one-time or sporadic debits.

This authority is to remain in effect until County of Vermilion River has received written notification from me/us of its change or termination. This notification must be received at least fifteen (15) business days before the next debit is scheduled at the address provided below and all outstanding taxes on termination become due and payable and subject to penalties. Any payment returned three times N.S.F. will result in termination on the plan and all outstanding utilities become due and payable and subject to penalties. An account that has been terminated due to N.S.F. payments, must wait six (6) months before applying to go on the plan again. I/We may obtain a sample cancellation form, or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca.

County of Vermilion River may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 days prior written notice to me/us. I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca.

PLEASE ATTACH A BLANK CHEQUE MARKED "VOID"

PROPERTY & TAX INFORMATION

ROLL NUMBER:	CUSTOMER ID (office use):		
LEGAL DESCRIPTION:	LOT	BLOCK	PLAN
LANDOWNER NAME:	MAILING ADDRESS - Street/Box:		
	City:		
	Prov:	Postal Code:	

FINANCIAL INSTITUTION INFORMATION (your payment will come from here)

NAME OF FINANCIAL INSTITUTION:	BRANCH ADDRESS - Street/Box:		
	City:		
	Province:	Postal Code:	
BRANCH (5 digits) & INSTITUTION NUMBER (3 digits):		ACCOUNT NUMBER:	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/>	

All persons whose signatures are required to sign on the bank account have signed the agreement below.

Signature

Signature

Date

Phone: Residence

Phone: Business

Please Note: The current taxes, local improvement levies plus any tax arrears must be paid in full for eligibility in the plan.

OFFICE USE ONLY

Payment Begins Oct. 15/ 20_____

Year _____ Tax Levy _____

Monthly payments Oct – June (1/12) _____

Year _____

Adjustment July – Sept _____ - _____ = _____ ÷3 = _____

New Levy 9x Monthly pmts New Monthly

Monthly payment Oct – June Tax Levy ÷12 = _____

Year _____

Adjustment July – Sept _____ - _____ = _____ ÷3 = _____

New Levy 9x Monthly pmts New Monthly

Monthly payment Oct – June Tax Levy ÷12 = _____

Year _____

Adjustment July – Sept _____ - _____ = _____ ÷3 = _____

New Levy 9x Monthly pmts New Monthly

Monthly payment Oct – June Tax Levy ÷12 = _____

Year _____

Adjustment July – Sept _____ - _____ = _____ ÷3 = _____

New Levy 9x Monthly pmts New Monthly

Monthly payment Oct – June Tax Levy ÷12 = _____

Year _____

Adjustment July – Sept _____ - _____ = _____ ÷3 = _____

New Levy 9x Monthly pmts New Monthly

Monthly payment Oct – June Tax Levy ÷12 = _____