

You must complete, sign and return this form to be enrolled. You will receive written confirmation of your enrolment in the pre-authorized utility bill payment program within 30 days of receipt of your application form. Incomplete forms will be returned.

\*If First Name and Last Name do not apply because the person obtained a registered Birth Certificate or Change of Name Certificate bearing a Single Name you may provide Single Name.

# Section 1 – Property and Applicant Information

| Type of Bank Account to be Registered:                                     |                   |  |  |  |
|--|-------------------|--|--|--|
| Utility Account Number followed by Client Number (20 digits)               |                   |  |  |  |
|  |                   |  |  |  |
| Property Address (Street Number, Street Name, Suite/Unit Number)           |                   |  |  |  |
| Name (First, Last or *Single - if applicable)                              |                   |  |  |  |
| Signature of Bank Account Holder (required) Date (mm-dd-yyyy)              | Telephone Number  |  |  |  |
| Name of Joint Bank Account Holder (First, Last or *Single - if applicable) | Telephone Number  |  |  |  |
| Signature of Joint Bank Account Holder (if required)                       | Date (mm-dd-yyyy) |  |  |  |

By signing this form you agree to the terms and conditions listed on page two. Please provide the additional signatures, if more than one signature is required on cheques issued against the account.

## **Section 2. Financial Institution Information**

Attach a void cheque, or a copy of a void cheque (available through online banking) or have your bank/ financial institution complete the following information on your behalf.

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|--|------------------|---------------------|--|--|
| Financial Institution (FI) Transit Number  | FI Number        | Account Number      |  |  |
|  |                  |                     |  |  |
| FI Name  |                  |                     |  |  |
| FI Address (Street Number, Street Name, Suite/Unit Number, City/Town, Province, Postal Code) |                  |                     |  |  |
| Name of FI Officer (First, Last or *Single - if ap   | oplicable) FI Of | ficer Title         |  |  |
| FI Officer Telephone Number  | Signa            | ature of FI Officer |  |  |



### Section 3. Conditions and Acknowledgements

- I/we authorize the City of Toronto Revenue Services (herein referred to as the "City") and the financial institution designated (or any other financial institution I/we may authorize at any time) to begin deductions as per my/our selections on this application.
- I/we understand that the City will issue a utility bill indicating the amount and the date of withdrawal from my/our financial institution account. The City will notify me/us in writing at least 10 days prior to the date of the withdrawal if the amount is to be increased. I/we can waive our right to this notice requirement if I/we authorize the City verbally.
- I/we understand that I/we may cancel my/our Pre-Authorized Debit (PAD) agreement by providing a signed written notice to the City at least 15 days before the next debit is scheduled and the notice must be sent to the City address indicated on this form.
- I/we also understand that the City may terminate this authority if any of my/our payments are returned by my/our financial institution as per the conditions of enrolment in the City's Pre-Authorized Utility Bill Payment Program.
- I/we may obtain a sample cancellation form or more information on my/our right to cancel this PAD agreement at my/our financial institution or by visiting www.payments.ca, the Payments Canada website or www.toronto.ca/utilitybill, the City's website.
- 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 visit www.payments.ca or may contact my/our financial institution.

### Section 4. Important Program Information

- The application date will be the date received if not completed.
- Financial institution/banking information is not printed on the bills.
- Line of credit accounts and credit card cheques cannot be used for pre-authorized payments.
- The payment plan is not transferable to another account.
- If you would like to have your utility bill mailed and paid by a designate, such as a tenant, relative, lawyer or accountant, visit toronto.ca/utility bill and refer to Tenant or Agent to Receive Utility Bills. Complete both the Designate Mailer Request form and the Pre-authorized Utility Bill Payment application and submit.

## Section 5. Submit Application

Mail: Revenue Services Box 2510, Terminal A Toronto, Ontario M5W 1H2 **Fax:** 416-696-4130 (For tips on faxing visit toronto.ca/propertytaxesandutilities)

Revenue Services collects personal information on this form under the legal authority of the City of Toronto Act, 2006, section 264, the City of Toronto Act, 2006, Ontario Regulation 594/06, Fees and Charges - Priority Lien Status, the Toronto Municipal Code, Chapter 849, Water and Sewage Services and Utility Bills, Article III, Collections and Billing, sections 27, 28, 30-32, 34 and 34.1 and Item 2008.EX18.1, City Council Decision 30, as confirmed by the City of Toronto By-law 506-2008. The information will be used to administer the Pre-Authorized Utility Bill Payment program. Questions about this collection can be directed to the Manager, Customer Service, Revenue Services, 5100 Yonge Street, Toronto, Ontario, M2N 5V7 or by telephone at 416-395-1048.