



**UTILITY PRE-AUTHORIZED PAYMENT PLAN**

Utility Account Number: \_\_\_\_\_

Civic Address: \_\_\_\_\_

**1. APPLICANT INFORMATION**

First Name (Please Print)	Last Name (Please Print)	Contact Telephone Number
_____		
First Name (Please Print)	Last Name (Please Print)	Contact Telephone Number
_____		

**2. BANKING INFORMATION**

What type of banking account will your monthly property tax payments be withdrawn from?

**Personal**       **Business**

Are you providing a void cheque or pre-authorized form obtained from your financial institution with this application?

**Void Cheque**       **Pre-Authorized Form**

**3. PAYMENT INFORMATION**

I/We authorize the Town of Hanna to debit my(our) account as indicated on the attached banking information. This authority will remain in effect until I/We or the Town of Hanna notify the other of termination. The total amount of the debit to my(our) account will be indicated as balance due on the utility notice.

**4. APPLICANT SIGNATURE**

I/We agree to the terms and conditions outlined on the back of this form

Signature	Date
_____	
Signature	Date

## ADDITIONAL INFORMATION

- All banks are participating
- If your bill is not correct contact the office as soon as possible. We will review your billing statement and make necessary adjustments prior to the pre-authorized payment being applied.
- Please note that your payment will be deducted early the morning of the due date. Therefore, sufficient funds or bank approved overdraft protection must be available at the time to avoid non-sufficient funds (NSF) or returned payment charges.

### OFFICE USE ONLY

\_\_\_ Mais – Utility Billing > Customer > Service Tab > Input the number 1 in Garbage Address House

\_\_\_ Mais – Pre-Authorized Module > Maintain Client

\_\_\_ Excel – W:\41-02 Water Lines & Distribution\Auto Debit Payments Report