



Municipality of North Middlesex

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PRE-AUTHORIZED EQUAL MONTHLY PAYMENT PLAN FOR WATER/SEWER CUSTOMERS

With your permission, your payments can be withdrawn automatically from your chequing account. Your payments are recorded automatically and individually on your bank statement or pass book. It is a modern, easy method to make recurring bill payments without the inconvenience of writing a cheque, paying for postage or coming in to pay the bill.

How the Equal Monthly Payment Plan Works:

On the 10th day of each month, an equal amount will be withdrawn from your bank account. The amount will be based on your total 2016 water/sewer billings divided by 11 for 2017 and by 12 for each year thereafter. Each account will be reviewed after the 3rd quarter reading and adjusted if necessary. Meters will still be read quarterly and you will still receive a quarterly statement showing your consumption and account balance.

If you choose this option, you will be notified of your equal monthly payment prior to the first payment. By choosing this option, you will be sure to avoid late payment penalties and know what your monthly expenses are for budgeting purposes.

If you do not choose this option, you may still pay your account by direct deposit, cheque, cash, debit or quarterly pre-authorized payments as you do now.

WATER/SEWER ACCOUNT INFORMATION:

ACCOUNT NUMBER: _ _ _ _ _

Name: _____

Address: _____

City: _____ Prov: _____ Postal Code: _____

Home Phone: (_____) _____ Email : _____

FINANCIAL INSTITUTION INFORMATION:

Financial Institution: _____

Branch Address: _____

City: _____ Prov: _____ Postal Code: _____

Bank Number: _____ Transit Number: _____ Account Number: _____

**** PLEASE INCLUDE A VOID CHEQUE WITH THIS APPLICATION****

I/we, as the above account holder(s), do hereby authorize the Municipality of North Middlesex and my/our financial institution to debit my/our account for payment of utility charges. This authorization may be cancelled at any time upon written notice by me/us. (Signatures on cancellation should be the same as those on this plan request.)

Signature(s): _____ Date : _____

Signature(s): _____ Date : _____

TERMS AND CONDITIONS:

1. The customer certifies that the bank account is in good standing with sufficient funds to cover pre-authorized payments as they become due. All signatures required on the bank account must be on this agreement.
2. The Municipality of North Middlesex will charge \$25.00, plus any applicable interest and/or penalties, for any payment returned by the bank for any reason. **Two infractions of this condition will remove the customer from this plan without further notice.**
3. We must receive notification of any changes to banking information no later than the 1st of the month. Please ensure we receive an complete updated agreement prior to this date.

FOR OFFICE USE ONLY:

Date Received: _____ Plan Start Date: _____ Letter Date: _____

Monthly PAP Amount: _____