



MUNICIPALITY OF CENTRAL HURON
PRE-AUTHORIZED PAYMENT AUTHORIZATION
Property Taxes

I/we authorize the Mun. of Central Huron 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 payment of all charges arising under my/our Mun. of Central Huron Property Tax account.

This authority is to remain in effect until the Mun. of Central Huron has received written notification from me/us of its change or termination. This notification must be received at least 10 (ten) business days before the next debit is scheduled at the address provided below. I/we may obtain a sample cancellation form, or more information on my/our right to cancel a Pre-Authorized Debit Agreement (PAD) at my/our financial institution or by visiting www.cdnpay.ca.

I/we have certain resource 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 resource rights, I/we may contact my/our financial institution or visit www.cdnpay.ca.

Personal Information: (Please Print)

Name(s): _____

Tax Roll Number: 40-30-_____ Phone Number: _____

Mailing Address: _____

Service Address (if different than above): _____

E-Mail Address: _____

Signature(s): _____ Date: _____

I/We are: _____ Applying for a Pre-Authorized Payment Plan _____ Changing Information on my Plan

Monthly (15th of the Month) _____ or Installments (4 times per year) _____

Complete this form, attached with a VOID cheque, and submit to:

Taxes@centralhuron.com OR
Municipality of Central Huron (ATTN: Finance Dept.)
PO Box 400
Clinton ON N0M1L0