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**WATER DEPARTMENT**  
**Pre Authorized Water Payment Application**

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**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Telephone No:** \_\_\_\_\_

**Water Account No:** \_\_\_\_\_

**Service Address:** \_\_\_\_\_

**Type of Service:** Personal \_\_\_\_\_ Business \_\_\_\_\_

I/We hereby authorize The Corporation of the Township of West Lincoln to debit my/our account indicated below for each billing of all payments due payable to the Township of West Lincoln on the due date shown on each billing.

**Financial Institution** \_\_\_\_\_

**Branch Address** \_\_\_\_\_

**Account Number** \_\_\_\_\_

I/We understand that each payment shall be handled in the same manner as if I/we had written a cheque for such amount. 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](http://www.cdnpay.ca).

**Date** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Notes:**

1. For joint accounts, all depositors must sign if more than one signature is required.
2. Separate forms must be completed for each property
3. Information on this form is collected under the authority of the Municipal Act, and is used to maintain a record of individuals participating in the Pre-Authorized Water Payment Plan in the Township of West Lincoln
4. For verification purposes, please enclose a cheque drawn on your financial institution marked "VOID"

Please direct all inquiries to the Treasury Department at 905-957-3346

**WATER DEPARTMENT**

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Automatic debit of your bank account on the instalment day for the instalment amount. No missed due dates or late payment charges. No line ups or mailing/postage costs.

#### **HOW DOES THIS PLAN WORK?**

This alternative will provide you with the convenience of automatic debit to our bank account on the instalment date for the instalment amount.

Once the Township receives your completed Authorization Form and a cheque marked "VOID", the water invoice will be mailed so that you are aware of the date and amount.

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#### **HOW DO YOU JOIN A PLAN?**

1. Your water bills must be paid up to date.
  2. Complete the "Pre-Authorized Tax Payment Authorization Form" which allows the Township to automatically withdraw the applicable payment directly from your Bank, Trust Company or Credit Union account.
  3. Attach a cheque marked "VOID" to your completed application form and send to The Township of West Lincoln, Box 400, Smithville, Ontario L0R 2A0
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#### **TERMINATION OF THE PLAN**

I/We may cancel participation in the plan at any time by advising the Treasury Department at least ten (10) business days before the next debit is scheduled at the address provided on the top of this form. 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](http://www.cdnpay.ca). The Township Treasurer may cancel the privilege of continuing the plan if two payments fail to be honoured in the accounting year.

If you move, change banks or bank accounts, you must notify the Treasury Department immediately by calling:  
**905-957-3346**