

TOWNSHIP OF BLANDFORD-BLENHEIM
PRE-AUTHORIZED PAYMENT PLAN
FOR PROPERTY TAXES

AUTHORIZATION FORM

Owner Names: _____

Telephone No.: Res: _____ Bus: _____

Assessment Roll No.: _____ Account #: _____

Email Address: _____

Financial Institution: _____ Acct. No.: _____

Branch No.: _____ Transit No.: _____

Branch Address: _____

Please check one (1) of the following:

_____ 4 installments _____ 10 installments

I/We hereby authorize the above Financial Institution to debit my/our account each month as indicated above for all payments payable to the Corporation of the Township of Blandford-Blenheim.

I/We accept the terms and conditions herein defined and authorize the Township of Blandford-Blenheim to being deductions for payment of my/our tax account for the amount specified. I/We ensure that the funds will be available each month to cover withdrawal and that insufficient funds will result in finance charges as applicable, and possibly cancellation of my/our enrollment in the payment plan.

This authority is to remain in effect until cancelled by either myself/us or the Township of Blandford-Blenheim by written notification. If not cancelled, it will remain in effect for future years.

** Authorized Signature (1)

Date

** Authorized Signature (2)

Date

** If more than one signature is required for withdrawals against the account number specified, all authorized signatures must be given.

ATTACHED VOIDED CHEQUE HERE

Mail to: Township of Blandford-Blenheim, Box 100, Drumbo On N0J 1G0

For Office Use Only.

Dated Processed: _____