Pre-Authorized Debit (PAD) Plan Agreement

Plan Information

The City of Pembroke offers a "Pre-authorized Debit Payment Plan" for the payment of realty taxes and/or flat rate water/sewer charges. In order to enroll in the Pre-Authorized Payment Plan, any arrears must be paid in full prior to application. This agreement must be completed in full and returned to City Hall along with a "VOID" cheque.

Property Tax Plan: Commences in January of each year, with twelve (12) equalized payments based on an estimate of the current year's levy and adjusted when the taxes are levied, in accordance with Schedule "A" to By-law 2007-68.

Water/Sewer Plan: Commences in January of each year, with twelve (12) equalized payments based on an estimate of the current year's billing and adjusted in the event of a rate change, in accordance with Schedule "A" to By-law 2007-68.

Payments are withdrawn on the 15th day of each month or the next business day should be 15th fall on a weekend or holiday. The City of Pembroke reserves the right to remove the account from the plan if payments are in default.

Customer Information

Which plan(s) do you wish to participate in? Tax ☐ Water/Sewer ☐
These accounts are for: Personal ☐ Business ☐

Name(s): _____

Property Address: _____

Roll Number: 4764 000

Water/Sewer Account No: _____

Home Telephone: _____

Work/Cell: _____

Email: _____

Bank Account Information (Please Enclose a Cheque Marked VOID)

Bank Name: _____

Institution Number: _____

Transit Number: _____

Account Number: _____

I/We hereby authorize the City of Pembroke to debit my/our bank account for the payment of my/our realty taxes and/or water/sewer billing in electronic form from the Banking Institution named above. I/We hereby authorize the City of Pembroke to increase/decrease the amount in accordance with Schedule "A" to By-law 2007-68 as amended. I/We will inform the City of Pembroke in writing of any change in the account information provided below. This authorization may be cancelled at any time upon thirty (30) days written notice by me/us to the City of Pembroke. 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 debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my/our recourse rights, I/we may contact my/our financial institution or visit Payments Canada (www.payments.ca)

Date: _____

Name (Please Print): _____ Signature: _____

Name (Please Print): _____ Signature: _____

Accepted By: _____ Date: _____

All enquiries should be directed to: City of Pembroke, 1 Pembroke Street East, Pembroke, ON. K8A 3J5
Tel.: 613-735-6821 ext. 1323 Fax: 613-735-3660 Email: ebilling@pembroke.ca

The information collected on this form is being collected under the authority of Section 342 of the Municipal Act, 2001 as amended and will be used for the sole purpose of applying pre-authorized payments to the relevant account.