



The Corporation of the Municipality of Strathroy-Caradoc
52 Frank Street Strathroy, Ontario N7G 2R4
Phone: 519-245-1070 Fax: 519-245-2177
www.strathroy-caradoc.ca

UTILITY BILLING PRE-AUTHORIZED FORM

I/we hereby authorize the below Financial Institution to debit my/our account on the six (6) bi-monthly payments or equal monthly payments as indicated on the enrollment plan below for all payments payable to The Corporation of the Municipality of Strathroy – Caradoc. I/we accept the terms and conditions herein defined and authorize The Corporation of the Municipality of Strathroy-Caradoc to begin deductions for payments of my/our water and/or sewer utility charges. I/we ensure that the funds will be available to cover the 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 The Corporation of the Municipality of Strathroy – Caradoc has received written notification from me/us of the change or termination. The notification must be received at least ten (10) business days before the next debit is scheduled at the civic address provided below.

The Corporation of the Municipality of Strathroy – Caradoc may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least ten (10) days prior written notice to me/us.

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 the PAD Agreement.

PLEASE PRINT

Date: _____

Yes, please enroll me in the: _____ Six (6) bi-monthly payments by utility bill due dates in January, March, May, July, September and November.

_____ Twelve (12) monthly payments due the 15th of each month (Budget Plan).

_____ Yes! Sign me up for e-send to receive utility bills and correspondence by email. Email: _____

Name(s): _____

Phone Number: _____

Civic Address To Be Set Up: _____

Mailing Address (if different from above) _____

Banking information

_____ Use the same account information as my property tax PAP account (**Please still provide a copy of a void cheque**).

Financial Institution (FI): _____

FI Transit Number _____ **FI Branch** _____ **FI Account #** _____

To ensure accuracy, please enclose a copy of your void cheque or bank form.

Bank Address _____ Bank Phone Number: _____

I have read and agreed to the terms and conditions: _____ Effective Date: _____

Authorized Signature(s): _____

REMOVAL OF THIS PLAN IS THE RESPONSIBILITY OF THE PROPERTY OWNER

Our customer service representatives can answer your questions at 519-245-1105 extension 224 or contact us by email billing@strathroy-caradoc.ca. You can mail this form and void cheque to the address at the top of this form or drop off at our office.

FOR OFFICE USE ONLY – Withdrawal Date: _____ Arrears: Yes No

Customer ID _____ Account #: _____

UTILITY BILL PRE-AUTHORIZED PLAN (PAP) TERMS AND CONDITIONS

The Pre-Authorized Utility Payment Program enables you to pay your utility bills directly from your bank account, without having to write cheques, pay for postage or worry about missed due dates. Municipality of Strathroy – Caradoc does not charge for this service.

- 1) Customer must be current owner of the property being set-up for Pre-authorized Payment Plan.
- 2) You may enroll and remain in the program if your utilities (water & sewer charges) are paid up to date.
- 3) If payment is returned NSF, you will be notified by letter that your account will be automatically removed from our Pre-Authorized payment plan unless payment is replaced within 10 days of date of letter. (NSF charges will be applied in accordance with Council By-Law in effect at the time.) Subscribers to the plan who have 3 payments returned in a year will become ineligible to continue on the plan. Once your plan is cancelled, all unpaid water & sewer charges become due and payable, and is subject to the standard penalties.
- 4) If you change your Banking information, or terminate the Pre-Authorized Payment Plan, you must advise The Municipality of Strathroy-Caradoc in writing by the 16th of the month before the change is to take effect. If written notification is not received, we will continue to take the monthly withdrawal until such notification is received.
- 5) Your bills will be sent to you as usual. The installment amount will be withdrawn from your account on the instalment due date or the next banking day. Please ensure this application is received in our office 10 days prior to due date.
- 6) Utility bills will be provided to you for information only.

PRIOR TO SUBMITTING APPLICATION

- 1) Ensure you have signed and completed the application form and attach an unsigned cheque (or photocopy) marked VOID or bank form with your banking information on it.
- 2) A separate application must be completed for each property you want to enroll in the Pre-Authorized Payment Plan.

SUBMITTING APPLICATION

- 1) By Mail – Completed applications with VOID cheque can be mailed to “The Municipality of Strathroy-Caradoc – Utility Billing” 52 Frank St. Strathroy ON, N7G 2R4.
- 2) In Person – Completed applications with VOID cheque can be dropped off at Strathroy City Hall located at 52 Frank St. Strathroy, ON N7G 2R4.