



PROPERTY TAX OFFICE: 220 Colborne Street
P.O. BOX 515, BRANTFORD, ON. N3T 6L6
Phone: 519-750-1072 Fax: 519-770-1259

APPLICATION FOR DUE-DATE or SELF-DIRECTED PRE-AUTHORIZED PAYMENTS (PAP) for PROPERTY TAXES
City of Brantford By-Law Number 53-94 (As Amended)

DUE-DATE PLAN (FOR ACCOUNTS NOT IN ARREARS) (Check the Due-Date option below.)

- The instalment amounts shown on your Interim and Final tax bills will be withdrawn from your bank account on the instalment due-dates.

SELF-DIRECTED PLAN (FOR ACCOUNTS IN ARREARS) (Check the Self-Directed option below.)

- This plan is for accounts that have outstanding tax arrears. Penalty and interest continues to accrue while the account has unpaid taxes. Each payment is first applied to outstanding penalty & interest, then to any other charges added as taxes (such as water arrears), then the balance towards property taxes.
Fill in the amount of the monthly payment you want deducted from you bank account. The PAP withdrawal will be processed on the last banking day of each month.

GENERAL INFORMATION:

- Enrollment is voluntary, and may be cancelled at the Taxpayers' request, upon written notice at least five (5) business days prior to the next scheduled withdrawal. Withdrawals made without the required cancellation notice will not be refunded.
Notice of changes in bank account to be debited must be supplied by written notice at least five (5) business days prior to the next scheduled withdrawal.
Forms for cancellation or change of information are available at the tax office, or on the City website. Payor may obtain a sample cancellation form, or further information on their right to cancel a PAD Agreement, at their financial institution or by visiting www.cdnpay.ca.
Dishonored payments (NSF, etc.) will be subject to penalty, interest and service charges. Due-Date payments that are returned must be replaced within 10 business days.
If there are two consecutive, or three dishonored payments in a 12-month period, Payor will be removed from the PAP plan for a period of one year from the last dishonored payment.
If you receive a Supplementary or Omitted tax bill for new or additional tax charges, these billings are not debited automatically, and must be paid separately on their indicated due-dates.
This is a Personal PAD agreement under Rule H1 of the Canadian Payments Association.

Recourse/Reimbursement Statement

"You [or I/We, depending on the context] have certain recourse rights if any debit does not comply with this agreement. For example, you [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 your [my/our] recourse rights, [I/we may] contact your [my/our] financial institution or visit www.cdnpay.ca."

BENEFITS:

Time saving: No line-ups or parking problems; payments are automatically withdrawn from your bank account.

Cost saving: No postage, envelopes or cheques to use.

(Detach and return the form below)



DUE-DATE PLAN Tax Roll #: 2906- - - - - 0000 Account # 0 - - - - -

SELF-DIRECTED Please deduct: \$ each month. Property Address: Date: Assessed Owners: Mailing Address (if different) Postal Code

I/we have read, understand and accept the terms and conditions herein, and consent to enrolling in the City of Brantford's Pre-Authorized Tax Payment Plan. I/we authorize my/our Bank, Trust Company, Credit Union or other similar financial institution, to withdraw and issue payments payable to the City of Brantford for payment of municipal taxes. Payments will be taken from the account shown on the attached VOID cheque.

(For a joint account, if more than one signature is required on cheques, all persons must sign below.)

Signature : Print Name:

Signature : Print Name:

Telephone #'s: Home: Business:

BE SURE TO INCLUDE A CHEQUE MARKED " VOID " WITH THIS FORM.