Town of Montague Sewer & Water Corporation
Pre-Authorized Debit Agreement

Customer Information (please print clearly)

Name: _____

Sewer & Water Account Number: ☐☐☐☐☐☐

Street Address: _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____

Email Address: _____

_____ I wish to receive water & sewer bills by email (when available)

_____ I wish to receive water & sewer bills plus notices of Town events by email

Bank Account Information

Account Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Branch Transit : ☐☐☐☐☐ Institution: ☐☐☐

Check one:

Chequing Account ☐ or Savings Account ☐

Name of Financial Institution: _____

Branch Address: _____

These services are for (check one): ☐ Personal ☐ Business Use

Either attach a void cheque or have your bank stamp here to verify the above.

Verified by Financial Institution:

Pre-Authorized Debit Details

I, the undersigned, authorize the Town of Montague Sewer & Water Corporation to debit the bank account identified above for:

(check one) ☐ the full amount owing **OR**

☐ $_____ (specify amount--see ** below) or the full amount owing, whichever is less

on the:

(check one) ☐ 25th day of every month or the next business day OR

☐ 25th day of every quarter (January 25, April 25, July 25, October 25) or the next business day OR

☐ _____ day of every month or the next business day

starting in the month of _____, 201___

I may revoke my authorization at any time in writing subject to providing notice of at least 7 days. (To obtain a sample cancellation form, or for more information on your right to cancel a Pre-Authorized Debit agreement, contact your financial institution or visit www.cdnpay.ca.)

Signature of Account Holder: _____

Name (please print): _____

Date: _____

You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Pre-Authorized Debit agreement. To obtain more information on your recourse rights, contact your financial institution or visit www.cdnpay.ca.

Please return the completed form in person, by email, fax or mail.

Email to: **townhall@montaguepei.ca** Fax: 902-838-3392

Mailing Address: Town of Montague Sewer & Water Corp.
PO Box 546, Montague PEI C0A 1R0

** On an up-to-date residential account, a monthly payment of $57.00 will cover today's rates. If your account is behind or is commercial and you wish to discuss a monthly payment amount, please contact the Town Hall, 838-2528.