

**Pre-Authorized Payment Authorization Form**

Please fill in and return along with a personal cheque, unsigned and marked VOID.

Name: (Please Print) \_\_\_\_\_

Street Address: \_\_\_\_\_

Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

**I/We Hereby Authorize**

\_\_\_\_\_  
Name of Bank

\_\_\_\_\_  
Branch Address

\_\_\_\_\_  
Town Province

Bank Number		

Transit Number				

Chequing Account Number									

**(TAXES)** to debit my/our account indicated above on a (circle one) monthly, installment basis for all municipal taxes payable to the Town of North Perth on

Roll Number(s)      3140 \_\_\_\_\_  
                                 3140 \_\_\_\_\_

**(WATER)** to debit my/our account indicated above on a monthly basis.

Water/Sewer Account Number

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_