



Pre-Authorized Tax Payment Plan Enrolment Form

Name(s)	Telephone (home)	Telephone (cell)
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Roll Number 	Property Address (include postal code)
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Email:	Secondary Email:
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Please include an unsigned void personalized cheque or void deposit slip for the applicable account.

Select one pre-authorized tax payment plan:

<input type="checkbox"/> Due Dates as they Occur Starting _____	<input type="checkbox"/> Monthly <input type="checkbox"/> 1 st or <input type="checkbox"/> 15 th Starting _____
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Acknowledgements
<p>1. By enrolling in the Pre-Authorized Payment Plan, I agree to the following terms, and authorize my financial institution identified above to withdraw property tax payments payable to the City of Oshawa (the City) at the specified intervals. Once I have received notice of the amount of the withdrawal, I will check my bank account regularly to confirm that withdrawals are being made in accordance with the authorization I have signed with the City of Oshawa.</p> <p>2. I understand that, after my enrolment in the Plan has been approved, I will receive written notice of the withdrawal amount from the City of Oshawa. Additionally, I will receive written notification from the City as adjustments are made to the withdrawal amount due to new billing, or otherwise.</p> <p>3. If application is being made to begin withdrawals in January, instalments for previous billings with a due date(s) prior to November 1st will not be automatically withdrawn pursuant to this agreement and payment must be remitted separately by me/us by the specified due date(s). Notwithstanding the above, instalments in respect of additional taxes as noted below due after November 1st will be automatically withdrawn from my account.</p> <p>4. If application is being made to begin withdrawals in July, instalments for previous billings with a due date(s) prior to June 1st will not be automatically withdrawn pursuant to this agreement and payment must be remitted separately by me/us by the specified due date(s). Notwithstanding the</p>

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- above, instalments in respect of additional taxes as noted below due after June 1st will be automatically withdrawn from my/our account.
5. Each payment that is not honoured from my account may be assessed an administration fee. The City will retry a returned payment approximately one week after the original return. If payment is not replaced prior to the next withdrawal date, the account will be removed from the plan and will revert to regular instalments.
 6. I will notify the City of Oshawa promptly in writing of changes to my financial institution, branch or account. If I am changing ownership of the property and/or need to cancel these pre-authorized payment arrangements, I will notify Taxation Services in writing giving at minimum 10 business days' notice.
 7. Additional property taxes resulting from supplementary/omitted assessments pursuant to section 33 or 34 of the Assessment Act and/or assessment changes pursuant to section 32, 39.1, 40 or 46 of the Assessment Act and/or tax appeals pursuant to section 359 or 359.1 of the Municipal Act will be automatically withdrawn on their specified due date(s) and I/we will be notified of the additional withdrawal amount(s) a minimum of 21 days prior to the first withdrawal date.
 8. The amount of a withdrawal may be reduced as a result of assessment changes pursuant to section 32, 33, 34, 39.1, 40 or 46 of the Assessment Act and/or tax appeals pursuant to section 334, 357 or 358 of the Municipal Act.
 9. Additional charges added to the tax account, if any, will not be automatically withdrawn from the bank account and payment for such charges must be remitted separately by the specified due date. I have certain recourse rights if any debit does not comply with this agreement. I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. For more information, on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca. I may obtain a sample cancellation form, or further information on my right to cancel a PAD agreement, at my financial institution or by visiting www.cdnpay.ca.
 10. The City reserves the right to cancel these payment arrangements with written notice to you. If two payments in the same taxation year fail to be honoured, the Manager, Taxation Services will cancel enrolment in the Plan.

I have read the above and hereby authorize my financial institution to debit my bank account in accordance with the City of Oshawa Pre-Authorized Tax Payment Plan agreement for the purpose of paying property taxes with respect to the property noted above. This form may contain personal information as defined under the Municipal Freedom of Information and Protection of Privacy Act. This information is collected under the legal authority of the Municipal Act, 2001, S.O. 2001 c.25, as amended. This information will be used and maintained by the City of Oshawa for the Pre-Authorized Payment Program. Questions regarding this collection may be directed to the City's Information Access and Privacy Officer, City of Oshawa, 50 Centre Street South, Oshawa, Ontario, L1H 3Z7, 905-436-3311.

Date

Signature(s) for accounts in more than one name, all authorized signatures must be provided