



Water & Sewer Utility

Pre-Authorized Debit (PAD) Plan Agreement

I/we authorize Charlottetown Water & Sewer Utility, and the financial institution designated (or any other financial institution I/We may authorize at any time) to begin deductions as per my/our instructions for recurring payments and/or one-time payments from time to time, for payment of all charges arising under my/our Charlottetown Water & Sewer Utility account(s). Charlottetown Water & Sewer Utility will provide 10 days written notice of the amount and date of each debit to be processed from my/our account. Charlottetown Water & Sewer Utility will obtain my/our authorization for any other one-time or sporadic debits.

This authority is to remain in effect until Charlottetown Water & Sewer Utility has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled at the address provided below. I/We may obtain a sample cancellation form, or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca.

I/we have certain rights if any debit does not comply with the agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our rights, I/we may contact my/our financial institution or visit www.cdnpay.ca.

Customer Information (Please Print)

Name: _____

Mailing Address: _____ City: _____

Province: _____ Postal Code: _____ Telephone: () - _____

Account(s) Number: _____

Account(s) Address: _____

These services are for (check one) Personal Business use

Banking Information (Please include a void cheque)

Account Number: _____

Branch & Transit Number: _____ (Branch – 5 digits; Institution – 3 digits)

Financial Institution: _____ Address: _____

Signature of Account Holder:

Signature of Joint Account Holder (if applicable):

Date: _____

Date _____