Property Tax and Utilities Pre-Authorized Payment
Schedule A – Bylaw 1319

_____ _____

Name(s) Telephone Number

_____

Mailing Address

_____ _____

Civic Property Address Email Address

FINANCIAL INSTITUTION INFORMATION:

(Blank cheque marked "VOID" to be returned with the completed form. If you do not have a chequing account, please have your bank complete this section)

_____ _____

Name of Bank or Financial Institution Branch Address

Branch # Institution # Bank Account #

I/We warrant and guarantee that the persons whose signatures are required to authorize withdrawals from the account have signed the Authorization below.

☐ To debit my/our account indicated above according to our billing frequency for all utility payments payable to the TOWN OF OLIVER, and I/We the undersigned have read and agree to the terms and conditions of the Utility Pre-Authorized Payment Plan.

Utility Account Number _____

☐ To debit my/our account in accordance with the terms and conditions of the Property Tax Pre-Authorized Payment Plan, to the TOWN OF OLIVER for pre-authorized monthly payments from August to May.

Property Tax Roll Number _____

Please indicate whether or not you are eligible for a Provincial Home Owner Grant on this property so that we may adjust your monthly tax prepayment amount accordingly.

770.00 Grant ☐ $1045.00 Grant ☐ No Grant ☐

I/WE HAVE READ AND UNDERSTAND THE TERMS OF THE TAX PREPAYMENT PLAN AND/OR THE UTILITIES PRE-AUTHORIZED PLAN.

_____ _____

Signature of Account Holder Signature of Account Holder