

Pre-Authorized Payment Application

Water Utility Payments Township of St. Clair 1155 Emily Street, Mooretown ON N0N 1M0 Phone (519)867-2128 Fax: (519)867-3886 Email: stclairpw@stclairtownship.ca www.stclairtownship.ca

You must return the <u>application</u> and a **VOID cheque for each water account number** (include your To Register: water account number on the front of the cheque) 20 days prior to your first payment to the Township office at the above mailing or email address: Attention: "Water Department".

A separate application must be completed for each water account included in the pre-authorized payment plan, (PAP). Any PAP returned from the bank will be subject to the Township of St. Clair NSF fee.

A quarterly statement will be issued indicating amount to be withdrawn.

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	Water Account Number:		-			-		
Property Locati	on:							-
Customer Name	e:							_
Mailing Addres	s:							_
City:		Province	e:	Posta	l Code:			_
Telephone No:	()		Cell/M	obile No:	() _			_
e-mail address:								
• I/we und	horize the Townsl lerstand and agree will be charged th it.	that should "	Pre-authoriz	zed Paymen	ts" be ret	urned fro	om the b	

I/we will notify the Township of St. Clair a minimum of 20 days in advance of a payment due date if I/we wish to change or cancel this service or make any changes to the banking information.

Customer Signature (if joint account)		Date		
		Date		
Office Hours:	Monday to Friday (except statutory and	civic holidays) 8:30am to 4:	to 4:30pm	
	FOR OF	FICE USE ONLY		
Name of Canadia	n Financial Institution			
Branch Address				
City Bank #	Transit #	Province Account #		