

Remember to write **VOID** on your Cheque.

Your Name Your Address	Cheque#
Pay to the order of	Date
VOID	
Name of Financial Institution Branch Name and Address	Signature
010# ##1 23+++ 1234 10123456	\$ _____ /100 DOLLARS

Include Your Chequing Account Number on the Enrollment Form.

Terms and Conditions

The customer certifies that his/her bank account is in good standing with sufficient funds to cover pre-authorized payments as they come due. If more than one signature is required on cheques issued against the account, all depositors must sign.

Should you move your account from one bank or branch to another you must notify us and make a new agreement so your payments will not be interrupted.

The Municipality of West Perth will charge \$15.00 (plus applicable interest) for any payment which cannot clear your bank.

Questions?

For further information on the Pre-authorized Payment Program, please contact the Municipality of West Perth Office at (519) 348-8429

Municipality of West Perth

Pre-Authorized Tax Payment Plan



easy

flexible

convenient



