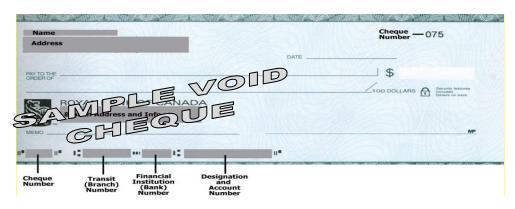


Township of Blandford-Blenheim

PRE-AUTHORIZED PAYMENT PLAN FOR PROPERTY TAXES

Owner Names:	
Telephone No:	
Email Address:	
Asses. Roll No: 3245-	
Financial Institution:	
Branch/Transit No.:	
Account No.:	
Please check one (1) of the following: 4 Installments Plan 10 Month Installment Plan	
I/We hereby authorize the above Financial Institution to debit my/our account each month as indicated above for all payments, payable to the Corporation of the Township of Blandford-Blenheim.	
I/We accept the terms and conditions, herein defined, and authorize the Township of Blandford-Blenheim to being deducted for payment of my/our tax account for the amount specified. I/We ensure that the funds will be available each month to cover withdrawal and that insufficient funds will result in finance charges, as applicable, and possibly cancellation of my/our enrollment in the payment plan.	
This authority is to remain in effect until cancelled by either myself/us or the Township of Blandford-Blenheim by written notification. If not cancelled, it will remain in effect.	
*Authorized Signature (1)	Data
*Authorized Signature (1)	Date
*Authorized Signature (2)	Date

* If more than one signature is required for withdrawals against the account number specified, all authorized signatures must be given.



ATTACH VOID CHEQUE HERE