

The Corporation of the Town of Amherstburg

Financial Services Department
Property Tax Division



271 Sandwich St. S.
Amherstburg, ON N9V 2A5
Tel: (519) 736-5401
email: propertytax@amherstburg.ca

Pre-Authorized Payment (PAP) Enrollment Form

Form Required for Each Property

Customer Information (Please Print Clearly)

Owner Name(s) : _____

Roll Number:

3	7	2	9	-				-	0	0	0	-					-	0	0	0	0
---	---	---	---	---	--	--	--	---	---	---	---	---	--	--	--	--	---	---	---	---	---

Civic Address of Property: _____

Phone Number: _____ E-Mail _____

Enrollment Effective Date: _____

Banking Information: You must enclose a Void Cheque or a Pre-Authorized Transaction Form from your Bank.

I/we hereby authorize the Town of Amherstburg and the Financial Institution designated below to begin deductions for my/our Pre-Authorized Payment Plan according to the following frequency:

Installment – Payments will be withdrawn on the installment due dates as indicated on your tax notices.

Monthly – Payments will be withdrawn on the last business day of every month. Payments are calculated in January and recalculated in July based on actual taxes due.

This PAP is for (select one) purpose:

Personal

Business

Signature of Account Holder:

Signature of Joint Account Holder (If applicable):

Name: _____

Name: _____

Date: _____

Date: _____

Please carefully read the reverse side of this application for the terms of this PAP agreement

Revision Date: 17- May-2023

Pre-Authorized Payment (PAP) Enrollment Form

Terms and Conditions

Upon sale of property, I/we understand it is our responsibility to cancel this pre-authorized plan by giving proper notice in writing to the Town of Amherstburg a minimum of 21 business days prior to the next scheduled payment date. The Town will accept no responsibility for pre-authorized payments made towards property which I/we no longer own.

Each payment shall be the same as if I/we had personally issued a cheque authorizing my/our Financial Institution to pay the Town of Amherstburg and to debit the amount specified to my/our account.

Should a payment not be honored, the Town reserves the right to take the returned payment amount on the next scheduled date in addition to the normal payment. A returned payment charge along with any applicable interest will be added to the account associated with any dishonored payment in accordance with Town by-Law. If an adjusted payment is returned, the Town reserves the right to cancel the payment plan enrollment.

I/we understand that the Financial Institution is not responsible to verify whether these payments are properly debited to my/our account.

This authorization may be canceled upon written notice by me/us to the municipality 21 business days prior to the next scheduled payment date. I/we understand that if this authorization is canceled, our obligations under this pre-authorized plan end, and other suitable arrangements must be made.

Any delivery of the authorization to the Town constitutes delivery by me/us to the Financial Institution.

I am/we are all the persons who are required to sign on the above account.

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

Pre-authorized Payment Plan Types

If your tax account is current, you may enroll in the PAP plan at any time during the year. The municipality will adjust the payments accordingly.

Installment

- You will receive your interim and final tax bill as usual. There will be a printed message on the bill confirming you are enrolled in the PAP plan.
- If you receive a supplementary billing and are enrolled in the installment PAP plan, the supplementary billing amount will be automatically withdrawn on the due date(s) indicated.

Monthly

- You will receive your interim and final tax bill as normal. Each bill will be divided by 6 monthly payments. There will be a printed message on the bill confirming you are enrolled in the PAP plan.
- If you receive a supplementary billing and are enrolled in the monthly PAP plan, your monthly payment amount will be increased to reflect the supplementary billing. You will receive written notification prior to the next scheduled payment date advising of the new amount to be withdrawn.

Completed PAP form with banking info must be received 21 business days prior to the effective enrollment date.