

PRE-AUTHORIZED PAYMENT PLAN CANCELLATION OR CHANGE FORM

SECTION 1 – TAXPAYER & PROPERTY IDENTIFICATION						
Roll Number		<u>3 7 3 9</u>		<u>0</u>	<u>0 0 0</u>	
Account Number						
Municipal Address						
Mailing Address (if different from above)						
Property Owner(s)						
Telephone Number(s)						
Fax Number						
Email Address						
SECTION 2 – PRE-AUTHORIZED PAYMENT PLAN CANCELLATION (1,2, 3 & 4)						
Please cancel the Pre-Authorized Payment Plan as of the following date (mm/dd/yy)						
SECTION 3 – PRE-AUTHORIZED PAYMENT PLAN CHANGE (1, 3 & 5)						
Select the Pre-Authorized Payment Plan you would like to change to by initialing one (1) box only						
Due-Date Plan						
Mid-Month Plan – 10 Months						
End-Month Plan – 10 Months						
Effective Month To Start (mm/dd/yy)						
SECTION 4 – PRE-AUTHORIZED PAYMENT PLAN BANK ACCOUNT CHANGE – PLEASE ATTACH VOID CHEQUE HERE(6)						
Please Change the Bank Account Information as Per Attached (or Below) as of the Following Date ⁽³⁾						
The City of Windsor prefers to receive a void cheque or banking information provided by a financial institution. Only complete this section if you are unable to provide a void cheque or document from financial institution.						
Canadian Cheque Sample						
	WEMO					
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625 : 65432 884 : 1574 620						
	0	Bank Tra				
Cheque # Institution Number Account Number						
* 825 * * 85432 * 884 * 1574 * 620 *						
Bank Transit	# In	stitution#	Account #			
(5 digits)	(:	3 digits)	(1 – 12 digits)			
Financial Instit	ution Name					
Financial Institution Address						
SECTION 5 – CERTIFICATION						
I/we have read, understand and accept the terms & conditions herein, and consent to enrolling in the City of Windsor's PAP Plan. I/we authorize my/our Banking Institution to withdraw and issue payments payable to the Corporation of the City of Windsor for payment of municipal taxes. Payments will be taken from the account shown on the form or as shown on the attached VOID cheque. For a joint account, if more than one signature is required on cheques, all persons must sign.						
Print Name	, , ,	Signature		Date		
Print Name		Signature		Date		

SECTION 6 – HOW TO SUBMIT FORM Option #1 – Mail Completed Form to: The Corporation of the City of Windsor Tax Collector 350 City Hall Square West, Suite 410 Windsor, Ontario N9A 6S1 Option #2 – Submit completed form electronically to: propertytax@citywindsor.ca Option #3 – Fax completed form to: 519-255-7310

SECTION 7 - NOTES

- (1) The date of cancellation or change cannot be the scheduled withdrawal date. It must be at least one day before or at least one date after your scheduled withdrawal date.
- (2) Cancellations can only be made by the Property Owner/Law Firm. Banking Institutions cannot cancel on your behalf.
- (3) We require at least <u>5 business days</u> notices prior to the next withdrawal date to cancel or make changes to the PAP Plan. For the End of the Month Plan, at least 15 business days notice is required in the month of June.
- (4) For more information on your right to cancel a PAP agreement visit <u>www.payments.ca</u>
- (5) <u>Due-Date Plan</u> Funds will be withdrawn automatically on the six Installment Due-Dates, which are typically February, March, April, July, September and November.
 - <u>Mid-Month Plan-10 months</u> Funds will be withdrawn automatically in **10** approximate equal payments from Feb-June and July-Nov. on the 15th day of each month. If the 15th falls on a weekend, the withdrawal will take place on the Monday thereafter.
 - <u>End of Month Plan-10 months</u> Funds will be withdrawn automatically in **10** approximate equal payments from Feb-June and July-Nov. on the last business day of each month.
- (6) The City of Windsor does not assume responsibility for errors or fees associated with incorrect banking information.
- (7) To access, change and request your property tax information on-line, visit the E-Services page on the City's website at www.citywindsor.ca and then choose My Property Tax to set up an account.

SECTION 8 – CONTACT INFORMATION

If you have any questions regarding the PAP plan or this form, please call 311 or outside the city limits 519-255-2489.

For detailed inquires, please email: propertytax@citywindsor.ca

FOR OFFICE USE ONLY:					
Date Processed:	Initials:				
	Date Processed:				