Grey County Logo Provincial Offences Office

# Pre-Authorized Payment Authorization

Personal / Household PAD  OR Business PAD

Payor Name(s):

Ticket Number(s):

Address:

City & Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:

I (We) hereby authorize the *County of Grey* to draw on my account:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank ID Transit Number Account Number

I (We) hereby authorize the *County of Grey* to process a debit, in paper, electronic or other form on the 7th day of each month in the amount of:

Fixed amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_Minimum of $25.00 per month

OR  Variable amount: as per attached pre-approved plan form.

lf the 7th day falls on a weekend or a statutory holiday, payment will be processed on the next business day. Returned payments will be subject to a $35 NSF fee and discontinuation of your payment plan without further notice.

I (we) acknowledge that I (We) have read, understood and accepted all the provisions contained in the Terms and Conditions of the Pre-Authorized Payment Authorization and that I (we) have received a copy.

To ensure accuracy, please provide a sample of your cheque marked “Void”.

**Personal / Household PAD only**

Signature(s) of Payor(s)

Date

Name(s) of Authorized signing Officer(s)

**Business PAD only**

Signature(s) of Authorized Signing Officer(s)

Date

Grey County Logo Provincial Offences Office

# Pre-Authorized Payment Authorization Terms and Conditions

I (We) acknowledge that this Authorization is provided for the benefit of the County of Grey and processing Financial institution and is provided in consideration of the processing Financial institution agreeing to process debits against my account in accordance with the Rules of the Canadian Payments Association.

I (We) warrant and guarantee that all persons whose signatures are required to sign on this account have signed this agreement below.

This authorization may be cancelled at any time upon notice being provided. I (We) acknowledge that, in order to revoke this authorization, I (We) must provide notice of revocation lo the County of Grey.

I (We) acknowledge that provision and delivery of this authorization to the County of Grey constitutes delivery by I (We) to the processing Financial institution. Any delivery of this authorization to you constitutes delivery by I (We).

I (We) and the County of Grey agree to waive the pre-notification requirement set out in Section 11 of Appendix ll of rule H1 of the Canadian Pavments Association.

I (We) undertake to inform the County of Grey, in writing, of any change in the account information provided in this authorization prior to the next due date of the PAD. The account that the County of Grey is authorized to draw upon is indicated in the accompanying authorization. A specimen cheque for this account has been marked 'VOlD" and attached hereto.

I (We) acknowledge that the processing Financial institution is not required to verify that a PAD has been issued in accordance with the particulars of my/our Authorization including, but not limited to, the amount.

I (We) acknowledge that the processing Financial institution is not required to verify that any purpose of payment for which the PAD was issued has been fulfilled by the County of Grey as a condition to honouring a PAD issued or caused to be issued by the County of Grey on my account.

Revocation of this authorization does not terminate any contract for goods or services that exists between me and the County of Grey. My Authorization applies only to the method of payment and does not otherwise have any bearing on the contract for goods or services exchanged.

A PAD may be disputed by I (We) under the following conditions:

1. the PAD was not drawn in accordance with my/our Authorization; or
2. the authorization was revoked; or
3. Pre-notification was not received.

I (We), in order to be reimbursed, acknowledges that a declaration to the effect that either (1), (2) or (3) took place, must be completed and presented to the branch of the processing Financial institution holding my account up to and including 90 calendar days in the case of a personal/household Pad (or up to and including 10 business days in the case of a business PAD), after the date on which the PAD in dispute was posted to my/our account.

I (We) acknowledge that a claim on the basis that my/our Authorization was revoked, or any other reason, is a matter to be resolved solely between the County of Grey and I (We) when disputing any PAD after (90 calendar days in the case of a personal/household PAD or l0 business days in the case of a business PAD).

## Definitions

**Business PAD:**

Means a PAD (Pre-Authorized debit in paper, electronic or other form) drawn on the account of a Payor such as, but not limited to, a corporation, an organization, a trade, an association, a government entity, a profession, a venture or an enterprise, for the payment of goods and services related to commercial activities of the Payor.

**Personal/Household PAD :**

Means a PAD drawn on the account of a Payor for payments such as, but not limited to, charitable donations, RESP and Spousal RRSP contributions, mortgage instalments, utility bills, insurance premiums, membership fees, property taxes, credit card billings and payment for other consumer goods and services.

Dated: June 5,2009