



MUNICIPALITY OF SOUTH BRUCE

Pre-Authorized Property Tax Payment

CHANGE TO BANKING INFORMATION

Owner`s Name(s): _____

Property Address: _____

Mailing Address: _____

City: _____ Prov: _____ Postal Code: _____

Home Phone: _____ Work Phone: _____

Assessment Roll Number for each property:

Change Banking Information to:

Name of Financial Institution: _____

Branch Address: _____

Branch Transit# _ _ _ _ _ Institute# _ _ _ Bank Acct# _____

Please Attach Cheque Marked Void

I/We as the account holder(s) hereby authorize the Municipality of South Bruce and my/our financial institution to debit my/our account for payment of taxes. This authorization may be cancelled at any time by written notice by me/us.

Signature _____ Date: _____

Signature _____ Date: _____

For a joint account, all depositors must sign if more than one signature is required on cheques issued against the account. Return this application to Municipal Office, Tax Department, **along with your VOID cheque.**

NOTICE OF COLLECTION

The personal information requested on this application form is collected by The Municipality of South Bruce under the authority of the "Municipal Act" and will be used for the purpose of administering the Pre-Authorized Payment Plan. Questions about the collection and use of this information under the "Municipal Freedom of Information and Protection of Privacy Act" may be made to the Clerk, Box 540, Teeswater ON N0G 2S0 or by telephoning (519) 392-6623.