

**DISTRICT OF NORTH SAANICH – TAX DEPARTMENT
PRE-AUTHORIZED PROPERTY TAX PAYMENT AUTHORIZATION FORM**

REGISTERED OWNER/S: _____ **Folio:** _____

_____ Starting Date: _____

CIVIC ADDRESS: _____ Phone No: _____

We hereby authorize _____ \$ _____

NAME OF FINANCIAL INSTITUTION

Branch Address: _____

Bank Account Number: _____ Chequing Chequing/Savings

To debit my/our account indicated above on or after the 15th day of each month for the months August to May inclusive each year. All payments are to be made to the District of North Saanich.

Date: _____

SIGNATURES: _____

For a joint account all depositors must sign if more than one signature is required on cheques issued against the account for verification purposes.

Please enclose one of your cheques marked void.

Your treatment of each payment shall be the same as if I/we have personally directed you to pay as indicated and charge the amount specified to the account of the undersigned. This authorization may be cancelled any time upon ten days written notice. Any delivery of this authorization to you constitutes delivery by the undersigned.

**TERMS AND CONDITIONS OF CUSTOMER'S AUTHORIZATION
TO THE DISTRICT OF NORTH SAANICH**

1. The taxpayer understands that the pre-authorized tax plan is for the convenience of the taxpayer. The District of North Saanich relies on the representation constituted by this authorization that the taxpayer's bank account shall be during the currency of this authorization in good standing with sufficient funds to cover such pre-authorized cheques as they become due and payable.
2. The taxpayer's pre-authorized cheque will be drawn and presented each month for payment on or after the date shown, to cover the payments(s) due in such month on the taxpayer's account.
3. If any adjustments to the Pre-Authorized Payment Plan are considered necessary, these will only be made after reasonable notice has been given to the taxpayer. This will usually be the annual tax notice.
4. This authorization may be terminated at anytime by the taxpayer or the District of North Saanich. Upon such termination, any balance due thereafter shall be payable directly to the District of North Saanich.
5. **THE HOME OWNER'S GRANT APPLICATION** is the responsibility of the taxpayer and must be completed and returned to the Municipal Hall **every year** before the penalty date to avoid penalties.

FOLIO NO. _____

**DISTRICT OF NORTH SAANICH – TAX DEPARTMENT
PRE-AUTHORIZED PAYMENT MODIFICATION FORM**

REGISTERED OWNER/S: _____ **Folio:** _____

_____ **New Amount:** _____

CIVIC ADDRESS: _____

Cancel _____ Modify \$ _____ Effective date: _____

Explanation: _____

Office Use Only

SIGNATURES: _____ **Date:** _____

_____ **Signature:** _____

FOLIO NO. _____