



Town of Grand Falls - Windsor

P.O. Box 439, Grand Falls - Windsor, NL A2A 2J8

www.grandfallswindsor.com

Pre-authorized Debit Agreement

Applicant Information

Section 1

Owner Name: _____ Customer Code: _____

Address: _____

Primary Telephone: _____ DcgU7cXY: _____

E-Mail Address: _____ GYwbXfrD\cbY: _____

Payment Details

Section 2

Balance Owning: _____ Month to Begin: _____ Fixed Amt: _____

Monthly Payment Amount: _____ Withdrawal Date: ^{15th} &/Or ^{30th} Seniors Discount: _____

Pre-authorized Debit Type: _____ 5% 25%

Property Tax Water Rates Business Tax

Banking Details

Please attach a void cheque (unsigned)

Section 3

Name of Bank: _____

Bank #: _____ Branch #: _____ Bank Account #: _____

Application Declaration

Section 4

I/We authorize the Town of Grand Falls - Windsor & the Financial institution designated above to debit my/our account in the manner specified.

I/We Understand that it is the property owner's responsibility to notify the Town of Grand Falls - Windsor of any change in banking information or ownership.

I/We understand that the Pre-authorized payment plan will continue every year until the Town of Grand Falls Windsor has been notified in writing for cancellation. I/We also understand that the deadline for cancellation is the 10th of that month, after that date the pre-authorized debit can not be stopped until the following month.

I/We understand that if property taxes increase/decrease payments will be changed accordingly without notification, unless specified that a fixed amount is required

[Please Click to agree to above terms](#)

I/We have read the above information and understand the terms of the payment plan selected.

Signature of Applicant

Signature 2 (if required)

Date: (yyyy/mm/dd)



You may submit this form in one of two ways:

1. If you have your Bank account information completely filled out, you can email this form directly to our Accounts Receivable department for immediate processing.

You can find your account information on the bottom of one your cheques that correlate directly with the account you would like the payments to come from. Here is an example of where to find that information



You can also request your account information from your bank if you do not have cheques for the account you would like payments to come from

2. After completing the fields in the form above, you can print this file, attach a void cheque and either A) Send it by mail to the Town Office – Attention Accounts Receivable or bring it down in person to the Town Office

If you have any questions about the information required to complete this form please feel free to call 709-489-0403 or email khemeon@townofgw.com