



Pre-Authorized Payment Form

Town of Edson
605-50 Street
P.O. Box 6300
Edson, AB T7E 1T7
P: 780.723.4401

☐ New Application ☐ Update Banking Information

Customer ID _____

Last Name _____ First Name _____

Business Name (if applicable) _____

Mailing Address _____ City/Town _____

Province/ Territory _____ Postal Code _____

Phone Numbers Tel #1 _____ Tel #2 _____

Email Address _____

Property Address _____

☐ Tax Roll Number _____ Effective Date _____

☐ Utility Account Number _____ Effective Date _____

I have included a copy of my banking information: ☐ Void Cheque Or ☐ Direct Debit Form

Terms & Conditions

1. I authorize the Town of Edson to withdraw payments from my account for property taxes and/or utilities as outlined above. Payments will be taken on the 1st day of each month for property taxes and the 25th day of each month for utilities using the bank account information provided. The only exception to this payment schedule is the January payment for property taxes, which will be withdrawn on the 10th of January to allow time for year end processes. If a due date falls on a weekend or holiday, the date of withdrawal will be the next business day.
2. I understand that this plan runs from January to December each year. If I sign up during the current year, a catch up payment must be made to bring my account in line with the payment plan schedule.
3. I declare that all my property tax accounts are current and not in arrears.
4. I acknowledge that the first 5 monthly withdrawals for property taxes are based on last year's tax levy plus and an estimated percent increase. Once the tax levy is applied in May, the monthly payments for June to December will be adjusted to clear your account by December 31.
5. I understand that any pre-authorized payments dishonoured by a financial institution will incur a fee, which will be added to the relevant account. If an account has 3 consecutive payments dishonoured by a financial institution, the Town may remove the account from the pre-authorized payment plan. The outstanding balance becomes due and payable and is subject to penalty.
6. I acknowledge that I am responsible to advise the Town, in writing, by the 15th of the month, of any changes required in that month (i.e. Payor information, bank account information, cancellations, etc.)
7. I understand that the monthly payment plan application is required for each property. A new application must be completed for each property.
8. **I have read, understand, and consent to the Terms & Conditions of the Pre-Authorized Payment Form as stated above and I acknowledge that the information provided on this form is complete and accurate.**

Signature _____ Date _____

FOIP Notification

The personal information that you provide to the Town of Edson on this form is being collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* (FOIP) and is used solely for the purposes relating to the administration of assessment/taxation services, utility, accounts receivable, and account administration. Collected personal information is protected from unauthorized access, collection, use and disclosure in accordance with the FOIP Act. If you have any questions about the collection, use, and disclosure of personal information, please contact the Town of Edson FOIP Coordinator at foip@edson.ca or 780-728-5233.