



PRE-AUTHORIZED PAYMENT SERVICE FORM

37 Mill Road	873 Canada Road	512 Main Street
Wellington, PE	Tyne Valley, PE	O'Leary, PE
902-854-2595	902-831-2900	902-859-2266

Part 1: To Be Completed By Payee			
1 Company (Payee) Name and Address		Reference No.	
		2	
		<input type="checkbox"/> New <input type="checkbox"/> Notice of change	
3 Payor - Surname		Payor - First Name	
4 Payor - Mailing Address			
		5 Telephone (work)	
		Postal Code	6 Telephone (Home)
Part 2: To Be Completed By Financial Institution For New Enrollment Or Change Of Account Information			
7 Financial Institution Name and Address (STAMP MAY BE USED)	Pre-Authorized Payment Information		
	8 Transit Number	9 Inst No.	10 Account No.
	79053	839	
	11 Account Name		12 Amount
13 Signature of Financial Institution Official		Date	

Date

*Signature (Payor)

*Signature (Payor)

*This authorization must be signed in accordance with the signing authority required to operate the bank account.