



Pre-authorized debit agreement plan (PAD)

To start the direct debit process, the account must not have any arrears, interest and/or penalties to pay and you must provide us with a check specimen.

The amounts of each coupon will be withdrawn from your account on the dates specified on your annual tax billing accounts only. No complementary taxes will be charged.

This authorization remains in effect until the Municipality of Chelsea has received from me/us a notice of its modification or termination. This notice must arrive at least 10 business days before the next scheduled debit date at the address indicated below

The Municipality of Chelsea may not assign this present authorization, directly or indirectly, by operation of the law, change of control or otherwise, without giving me/us a written notice at least 10 days before.

I/We have certain rights of recourse if a debit does not comply with this agreement. For example, I/we are entitled to receive a refund of any PAD that is not authorized or that is not consistent with this PAD Agreement. A refund request must be sent to the address below.

I/We authorize the Municipality of Chelsea, and the designated financial institution (or any other financial institution that I/we may authorize at any time) to begin deductions as per my/our instructions, for monthly regular recurring amounts and/or occasional one-time payments for the settlement of annual fees charged to my/our accounts with the Municipality of Chelsea.

Please join a check specimen

Initials

PLEASE PRINT

Date: _____ Start pre-authorized payments: _____

Owner: _____ Co-owner: _____

Registration number : _____ Address : _____

Mailing address: _____ City: _____

Province: _____ Postal code: _____

Telephone: (office) _____ (residence): _____

INFORMATION ON YOUR FINANCIAL INSTITUTE

Name of the financial institute: _____

Address: _____

City: _____ Province : _____ Postal code : _____

Authorized signatures : _____

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