Pre-authorized Tax Payment Plan

Convenience and savings!

Pre-authorized payments have many benefits:

- there are no cheques to write out
- you'll save on postage and transportation
- you don't have to keep track of due dates or payments
- you'll avoid paying a penalty for missing a due date

Plan #1 Monthly convenience

Your taxes will be automatically withdrawn from your bank account in eleven equal payments, starting December 1st of each year. In November, which is the 12th month, your tax account will be adjusted and a detailed statement mailed to you. The balance owing will be withdrawn from your bank account on November 1st, or the overpayment will be refunded by cheque.

Plan #2 Four Payments

On each due date the tax installment will be automatically withdrawn from your bank account.

Are You Eligible?

- If you own property in the Township of Assiginack and have no outstanding taxes, you can take advantage of this convenient program.
- You can enroll any or all of your properties in this program.
- Your initial application is valid as long as you own the property and for as long as you want to stay in the plan. You do not have to reapply every year.

Supplementary Tax Billings

During the year, if there is a supplementary tax bill, you will be notified and given the option of paying the supplementary bill on the installment due date, or increasing your monthly payment, or having your tax account adjusted in November.

Withdrawal or Information Change

If you have information changes, or want to withdraw from the pre-authorized plan, please notify the Tax Department in person or in writing by the 15th day of the month.

Need Information

For further information, call the Township of Assiginack Tax Department at 705 859-3196 or 1 800 540-0179, or fax us at 1 705 859-3010.

859-3010.				
How to Sign	Fill in the application and return it.		ROLL NUMBER	
Up	By Mail: Twp. Assiginack Box 238 Manitowaning ON P0P 1NO	In person: Municipal 25B Sprag Manitowar	Office ge St. <u>ning</u>	5111 000
Property Information [First Time Applicant	Address C		si
Name		ŗ	•	plication, you must enclose one of your
Property Address		[t	that payment	ques marked "VOID". This will ensure s are withdrawn from the correct bank
·	_ProvPostal Code ferent)	j	my/our accou	ze the Township of Assiginack to debit unt indicated for all estimated property to the Township of Assiginack on cone)
Date			☐ Four (4)	regular tax installments (11) monthly payments
Tel (Residence)	1 st Signature]	I/we had pers	t of each payment shall be the same as if sonally issued a cheque authorizing
Tel (Business)	2 nd Signature (if joint ac	count)	payment; and to debit the amount to my/our account. This authorization may be cancelled at any time upon written notice by me/us.	