

TOWNSHIP OF CENTRAL FRONTENAC

PREAUTHORIZED PAYMENT APPLICATION FOR PROPERTY TAXES

1084 Elizabeth St, P.O. Box 89, Sharbot Lake, ON, K0H 2P0

Tel: 613-279-2935 Fax: 613-279-2422 www.centralfrontenac.com

Important Information

- Before starting Option 1 or 2, property taxes must be up to date.
- A separate application is required for each roll number.
- Applications are valid for future years unless cancelled, in writing, by either you or the Township of Central Frontenac. Withdrawals will continue until cancellation.
- A returned cheque will automatically cancel the program and a returned cheque charge will apply. You may reapply to the program with the understanding that acceptance is discretionary.

Please initial the line of the appropriate option

 Option # 1 – 9 Monthly Payments

You will receive an EFT (Electronic Funds Transfer) notice in advance of the first withdrawal to inform you of the amount to be withdrawn on the 15th of each month from January to September from your bank account as specified below.

January to September payments are based on the previous years total taxes levied. The September payment is adjusted to reflect the final balance owing and you will be notified in advance of the amount due.

 Option # 2 – Installment Due Date Payment Plan

The amount due for each installment on the 15th of the month in which the taxes are due (4 annually) will be withdrawn from your bank account. You will still receive your interim and final bills showing you the amount due and the installment due dates.

 Option # 3 – Arrears Payment Plan

Call 613-279-2935 or email at taxes@centralfrontenac.com to set up pre-approved monthly payments on the 15th of each month (12) in the amount of \$_____.

I/we the undersigned hereby authorize the Township of Central Frontenac and the financial institution designated by attaching our void cheque, to begin deductions for my/our preauthorized payment. This Authorization applies only to a method of payment and cancellation of this Authorization does not mean that the Customer’s contractual obligations to the Township of Central Frontenac are ended. The Customer will notify the Township of Central Frontenac promptly in writing if there is any change in the information below.

Please attach a sample cheque marked ‘VOID with this Form & Return

Assessment Roll Number: 10-39- _____ - _____ - _____ - 0000

Name(s) on Tax Bill: _____

Property Civic Address (911 number): _____

Mailing Address : _____

Telephone Number Home: _____ Work: _____

Email address: _____

Signature

Date