The Rural Municipality of Spiritwood No. 496

(10) business days before the next debit is scheduled.

PO Box 340

Spiritwood, SK

SOJ 2M0

Telephone: 306-883-2034 Email: admin@rmofspiritwood.ca

Pre-Authorized Debit (PAD) Agreement for Property Tax

1. Payor's Information (Please print or type clearly)

| Payor's Name: | | | | |
|--|--|--|--|--|
| Customer Number: | | | | |
| Mailing Address: | | | | |
| City: | Province: | Postal Code: | | |
| Phone Number: | E-mail Addre | Address: | | |
| 2. Payor's Financial Institution Inf | ormation (Please print | or type clearly) | | |
| · | • | cial institution and your account OR formation (FI supplied PAD form OR | | |
| Account Number: | | Transit Number: | | |
| | | | | |
| Financial Institution Number: Financial Institution Name: 3. Pre-Authorized Debit Details | | | | |
| You, the Payor, authorize The RM above by equalized payments on t taxes are levied, the pre-authorize tax amount, less the payments alre | the 28 th day of every mo ed debit payment will be eady made in the curre yor, confirm that you ha | to debit the bank account identified onth or the next business day. When a adjusted to reflect the current year's nt year, to ensure tax balances are paid ave authority under the terms of your | | |
| These tax payment(s) are for: (che | ck one) Personal | Business | | |
| notification or the Payor has comp this Pre-Authorized Debit (PAD) Ag on your right to cancel a PAD Agre | pleted a cancellation for greement. A sample car ement, at their financia | wood No. 496 has received written m, of any change(s) or termination for ncellation form, or further information al institution or by visiting on form must be received at least ten | | |

You have certain recourse rights if any debit does not comply with this agreement. For example you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Pre-Authorized Debit (PAD) Agreement. To obtain more information on your recourse rights, you may contact our financial institution or visit www.payments.ca.

I/We will promptly notify the RM of Spiritwood No. 496 in writing if the attached banking information changes and/or the ownership changes.

Insufficient monthly withdrawal amounts will result in not-sufficient fund(NSF) fees and monthly amounts will be adjusted accordingly to ensure tax balances are paid in full prior to the end of the year. If there is more than one NSF payment, account holders will be removed from the preauthorized payment plan, interest will be charged and other arrangements must be made to pay remaining balances and all future taxes.

I/We acknowledge that this agreement is provided for the benefit of the "Payor" and "The RM of Spiritwood No. 496" and is provided in consideration of the municipality agreeing to process debits (PAD's) against the account (Property Taxes) with the municipality in accordance with the Rules of the Canadian Payment Association (the "CPA Rules") By signing this agreement, The Payor acknowledges having received and having read a copy of this agreement, acknowledges understanding of this agreement, and agrees to be bound to this agreement. I/We warrant and guarantee that the person(s) whose signature(s) are required to sign on the Account have signed the agreement.

| Signature of Account Holder | |
|--|--|
| Name (Please Print) | |
| Signature of Joint Account Holder (if applicable) | |
| Name (Please Print) | |
| Date | |
| Land Location and amount allotted | |
| | |
| Land Location (multiple) and amount allotted to each Land Location | |
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