*** Important Information: MONTHLY Pre-Authorized Tax Payment Plan ***

To enrol you must have no past-due arrears. Below is a list of the start dates available for the monthly pre-authorized payment plan. In order to enroll you must plan to start on one of the listed dates and you must meet the payment requirement for that start date.

- **First Automatic Withdrawal in January**
  - Your application must be received by December 1st.

- **First Automatic Withdrawal in February**
  - Your application must be received by January 15th.
  - A payment must be made for 10% of your previous year’s tax levy (rounded to the nearest dollar) at the time of application.

- **First Automatic Withdrawal in March**
  - Your application must be received by February 15th.
  - A payment must be made for 20% of your previous year’s tax levy (rounded to the nearest dollar) at the time of application.

- **First Automatic Withdrawal in June**
  - Your application must be received by May 15th

- **First Automatic Withdrawal in July**
  - Your application must be received by June 15th.
  - A payment must be made for 10% of the previous year’s tax levy (rounded to the nearest dollar) at the time of application.

Payments must always be withdrawn on the first working day of each month from January to October. There are no exceptions.

When you are enrolled you will not receive an Interim Tax Bill. You will receive a Final Tax Bill that will detail your new payment amount for July to October and also for the upcoming January to June. You will not receive any further notice of your January payment so please ensure that you mark your calendar to remind yourself that your payments will begin again in January.

If you wish to cancel your pre-authorized payment plan we must receive written notification no later than the 15th of the previous month.

If you are selling your property you must provide our office with a written request to cancel the pre-authorized payment. Ownership changes are not always received in a timely manner and a delay may result in additional payments being withdrawn from your account.

***** Please carefully read and complete the attached application *****
Pre-Authorized Tax Payment Plan
APPLICATION FORM

Tax Roll no. (appears on your Final Tax Bill)

Property Location ____________________________________________

Property Owner(s) ____________________________________________

Mailing Address ______________________________________________ Postal Code __________

Home Number ___________________________ Business Number __________

☐ I have attached a blank cheque marked “VOID”

1 We are not able to accept savings, line of credit accounts or credit card cheques.

Please indicate if this application is made on behalf of ☐ an individual or ☐ a Business

PLEASE ENROLL ME/US IN THE FOLLOWING PRE-AUTHORIZED TAX PAYMENT (PTP) PLAN:

☐ MONTHLY INSTALMENT PLAN. *see important information about terms/conditions for start dates

I/we authorize the City of Kingston to process a debit to be withdrawn monthly from January to October on the 1st business day of each month equivalent to 1/10th of my(our) previous yearly taxes from January to June and the balance of my current yearly taxes*, once known, equally from July to October.

☐ DUE DATE PLAN. The amount due is withdrawn on the due date. Application must be received 15 days before the payment due date.

I/we authorize the City of Kingston to process a debit, equivalent to the “actual amount due as billed” on the due date approved by City Council for the interim and final tax bills.

*Yearly taxes do not include supplementary billings that must be paid separately from the PTP plan.

Every year you will be notified of your new payment for the following taxation year.

TERMS AND CONDITIONS

I/we authorize the City of Kingston to debit the account as indicated on the attached “VOID” cheque under the terms and conditions agreed to by me(us) with the City of Kingston until such time as written notice to the contrary is given. I/we will check my(our) statement or passbook regularly to confirm that withdrawals are being made in accordance with the authorization. I/we warrant that all person(s) whose signature(s) are required to sign on this account have signed this agreement.

I/we acknowledge that delivery of authorization to the City of Kingston constitutes delivery by me(us) to the branch of the financial institution of which I/we maintain an account and that such financial institution is not required to verify that the payment(s) are withdrawn in accordance with this authorization.

I/we acknowledge that this authorization is account specific and non-transferable. I/we will reapply for PTP plan on a new property if within the City of Kingston.

I/we will notify the City of Kingston in writing a minimum of fifteen (15) days prior to the next due date of the pre-authorized debit of any changes in the account information or termination of the authorization.

I/we acknowledge that we will be terminated from the PTP plan after two (2) payments have been returned by my(our) bank or if no replacement cheque is received after the first returned payment, and that administrative and interest charges will apply. If any of my(our) PTP plan payments do not clear through my(our) bank account, the City will charge me(us) an applicable administrative fee and interest charges. If returned payments are not replaced on time, I/we will also be automatically removed from the PTP plan and returned to the regular instalment plan. I/we may obtain a sample cancellation form, or more information on my(our) right to cancel a Pre-authorized debit agreement at my(our) financial institution or by visiting www.cdnpay.ca.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PTP that is not authorized or is not consistent with the PTP agreement. To obtain a form for a Reimbursement Claim or for more information on my(our) recourse rights, I/we may contact my(our) financial institution or visit www.cdnpay.ca.

Please print name(s) ____________________________________________ Date: __________________

Please sign name(s) ____________________________________________

Return application to: CITY OF KINGSTON, Tax Department
216 Ontario Street, P.O. BOX 640,
Kingston, ON K7L 4X1

All applications MUST be received 15 days prior to the first payment date.

For more information about the PTP plan, call 613-546-4291 ext. 2015

Form Date: Mar. 23, 2012