



902 7th Avenue
 Canmore, AB T1W 3K1
 Phone 403-678-1519 Fax 403-678-1524
 AR@canmore.ca

Rev. NOV 24/15

**Business Registry
 Pre-Authorized
 Payment Plan**
 Annual Renewal

CUST ID	_____
LIC NO.	_____
First Withdrawal Date:	
Mo/Yr	_____

Section A - Applicant's Business Information

Business Name: _____

Name of person on bank account if different than above. Include all names of signing authorities.

Mailing Address: _____

City/Town _____ Prov./State _____ Postal Code/Zip _____

Phone Number: _____ Email: _____

Section B - Applicant's Bank Account Information - Canadian Banks Only

Attach 'void' cheque here (handwritten bank account information will not be accepted)

Important: It is the responsibility of the account holder(s) to confirm that payments are being withdrawn from their bank account.

Section C - Annual Plan Conditions

- 1. The annual business licence invoices will be mailed out in advance of the withdrawal date; and the full amount owing will be withdrawn on the LAST BUSINESS DAY of the month the invoice was issued.**
2. Payments may be made only via automatic debit from a chequing or savings account drawn on a Canadian bank. Line of Credit, Power Line accounts and credit cards cannot be used.
3. While the Town of Canmore does not charge for this service, normal bank service charges may apply.
4. Upon cancellation of the plan all invoices must be paid in full.
5. It is the responsibility of the account holder(s) to monitor the payment withdrawn from their bank account.
6. If a default in a payment occurs, the Town of Canmore may remove the account holder from the Pre-Authorized Payment Plan and may refuse re-instatement on the plan. In addition, NSF charges will apply.
7. The Plan is not transferrable - please complete a new application for all new businesses.

To Cancel the Plan:

Written notification must be provided at least 5 business days prior to the next scheduled withdrawal in order to:

1. Change banking information (new 'void' cheque required).
2. Cancel plan for any reason: Email AR@canmore.ca or Phone (403) 678-1519

Exclusions: Micro Businesses are not eligible for the Plan since the declaration must be declared annually.

Section D - Signing Authorization

I/we acknowledge that I/we have read and understand the Monthly Plan Conditions:

Signature of Applicant(s) Print Name(s)

Date _____

FOIP Notification: Your personal information is protected by the privacy provisions of the *Freedom of Information and Protection of Privacy Act*. The personal information you provide on this form is being collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy Act*. This information will be used for the purposes of collecting invoiced charges through an installment plan. This form is transitory and will be destroyed upon cancellation of your account. If you have any questions about the collection or use of this information please contact the FOIP Coordinator, Town of Canmore, 902 7th Avenue, Canmore AB. T1W 3K1, (403) 678-1509