

APPLICATION FOR UTILITY BILLING AND PAYMENT PLAN

ACCOUNT #	SERVICE ADDRESS	
APPLICANT NAME	BUSINESS PHONE	HOME PHONE
APPLICANT(S) ADDRESS (If different than service address)		
E-MAIL ADDRESS (Mandatory for Monthly Billing)		
PLEASE NOTE: Electronic invoices are in PDF format. Please ensure that you have a PDF reader installed on your computer in order to view your emailed invoice.		

PLEASE ATTACH TO THIS APPLICATION A SAMPLE CHEQUE MARKED VOID

Billing Frequency and Associated Payment Option

Invoice Type (Select One)

Select One Only

Electronic Paper

- | | | | |
|--------------------|--|-------|-------|
| 1. Monthly _____ | Monthly payments will be the actual amount owing on each invoice | _____ | _____ |
| 2. Quarterly _____ | Quarterly payments will be the actual amount owing on each invoice | _____ | _____ |
| 3. Quarterly _____ | Amount of monthly payment (Budget) \$ _____ | _____ | _____ |

MONTHLY PAYMENTS (BUDGET) ARE CALCULATED AS FOLLOWS:

Payments are based on an average of the previous 12 months' consumption charges for each service address. Payments begin the 1st banking day of each month and continue for 11 consecutive months. Annual reconciliation of year to date payments and charges will occur as follows: Billing Cycle 1: September, Billing Cycle 2: October, Billing Cycle 3: November. In that month, the pre-authorized debit amount may differ from the previous budget amounts in order to settle your account. At that time, you will be notified of your new budget amount for the upcoming year.

TERMS AND CONDITIONS

- Your utility account must be paid in full to qualify for the plan. For quarterly billing in order for pre-authorized debits to begin between regular billing cycles, the payment amount for any month(s) since your last regular payment must be paid prior to the payment plan commencing.
- You must have chequing privileges at a financial institution (bank, trust company, treasury branch, credit union or caisse populaire).
- The payments will be made from your financial institution on the 1st banking day of each month.** If three (3) payments are not honoured by your Financial Institution in a calendar year, the City will remove you from the plan, at which time all unpaid charges become due and are subject to penalty in accordance with the City's Water & Wastewater Rates By-law. Please note all returned payments are subject to a \$20.00 NSF fee.
- The City of Brandon does not charge for this plan, however, normal bank service charges may apply.
- If you change bank accounts, it is your responsibility to inform The City of Brandon, Utility Billing Section, in writing, of the change at least two weeks in advance of the next payment. A new sample cheque marked VOID and reflecting your new bank account must be attached.
- If, for any reason, you wish to withdraw from the plan, it is your responsibility to inform The City of Brandon, Utility Billing Section, in writing, at least two weeks in advance of the next payment. All unpaid charges become due and payable and are subject to penalty in accordance with the City's Water & Wastewater Rates By-law. Any credit balance will be refunded to the bank account attached to this application.
- If you move to a new service address within the City of Brandon, it is your responsibility to inform The City of Brandon, in writing that you wish to have the payment plan transferred to your new account.

I/We the applicant(s) authorize my/our financial institution to electronically debit my/our account for the utility payments payable to The City of Brandon.

I/We have read and understand the Terms & Conditions as stated above.

APPLICANT'S SIGNATURE _____ Day _____ Mo. _____ Yr. _____

SECOND SIGNATURE (IF REQUIRED) _____ Day _____ Mo. _____ Yr. _____

This personal information is being collected and will be used for the purpose of implementing the Utility Payment Plan of The City of Brandon. It is protected by the Protection of Privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions about the collection contact Ian Richards, City of Brandon, 410 – 9th Street, Brandon, MB R7A 6A2 or call (204) 729-2269.

**RETURN ORIGINAL TO ABOVE ADDRESS
 OR SUBMIT BY E-MAIL TO WATER@BRANDON.CA WITH SCANNED COPY OF VOID CHEQUE
 PLEASE RETAIN A COPY FOR YOUR RECORDS**