



TOWNSHIP OF UXBRIDGE

Pre-Authorized Tax Payment Plan (PAP)

WHY SHOULD YOU SIGN UP?

- It's the most convenient option to pay your property taxes.
- Regular payments allow for easier monthly planning.
- You'll never have to worry about missing an installment date!

The PAP Plan provides for taxes to be automatically withdrawn from your bank account on the dates set by the Township in either 11 monthly payments or 4 installments.

CHOOSE FROM TWO PAP PLANS.....

MONTHLY PAYMENT PLAN (1st day of month)

There are six monthly interim payments (based on the previous year's Final Tax Bill) from January to June and five monthly final payments (based on the current year's Final Tax Bill) from July to November. The first withdrawal will be made on within the first days of January, and the subsequent withdrawals will be made on the first day of each of the following months (except December).

INSTALLMENT PLAN (ON DUE DATES)

There are 4 installments in a calendar year; two Interim installments (February & April) and two Final installments (June & September). Each withdrawal will be made on the prescribed due dates noted on each tax bill.

Submit your application by April 30th to enroll for the Final Payments or by November 30th to enroll for the Interim payments

IT'S EASY TO APPLY!

1. Complete the Application Form and select the payment plan you prefer.
2. Attach a personal blank cheque marked "VOID".
3. Return the Application Form and void cheque to: Township of Uxbridge, Tax Department, PO Box 190, 51 Toronto St S, Uxbridge ON L9P 1T1, or by email at info@town.uxbridge.on.ca.

Please note: To be eligible for this program, your tax account must be paid in full and you must have a full assessment.

Township of Uxbridge documents are available in alternate formats upon request. Please fill out the Accessibility Request for Alternate Formats Form at www.town.uxbridge.on.ca or contact the Accessibility Coordinator at 905-852-9181 x 209 or at accessibility@town.uxbridge.on.ca.

UXBRIDGE

Pre-Authorized Tax Payment Plan (PAP)

APPLICATION FORM EFFECTIVE JANUARY or JULY

Tax Roll #	1	8	2	9	-					-					-	0	0	0	0
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(This number appears on your Tax Bill)

Property Address: _____

Property Owner(s): _____

Mailing Address: _____

Home Phone Number
Or Business Number: _____

PLEASE ENROLL ME/US IN THE FOLLOWING PAP PLAN:
If no option is checked, you will be enrolled in the MONTHLY PLAN.

- MONTHLY PLAN commencing the beginning of January or July.
(There is no withdrawal in December each year. The Interim Tax Bill is divided by 6 and the Final Tax Bill is divided by 5).
- INSTALMENT PLAN commencing end of February or end of June.
(The Interim Tax Bill is divided by two and the Final Tax Bill is divided by two).
- I have attached a personal blank *cheque marked "VOID".
*We are not able to accept savings, line of credit accounts or credit card cheques.

Note: All subsequent billings will be withdrawn in the same manner as the Interim/Final Tax Bill on the due dates accordingly.

TERMS AND CONDITIONS

I (we) authorize the Township of Uxbridge to debit the account as indicated on the attached "VOID" cheque under the terms and conditions agreed to by me (us) with the Township of Uxbridge 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 this account have signed this agreement.

I (we) acknowledge that delivery of authorization to the Township of Uxbridge constitutes delivery by me (us) to the branch of the financial institution at 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 non-transferable. I (we) will reapply for pre-authorized payments on a new property if within the Township of Uxbridge.

I (we) will notify the Township of Uxbridge in writing a minimum of fourteen (14) days prior to the next due date of the pre-authorized debit of any changes in the account information or termination of this authorization.

I (we) acknowledge that we will be terminated from the 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) pre-authorized payments do not clear through my (our) bank account, the Township will charge me (us) a \$50.00 administrative fee and interest charges. If returned payments are not replaced on time, I (we) will also be automatically removed from the Pre-Authorized Payment Plan and returned to the regular installment plan.

PLEASE NOTE: TO JOIN THIS PLAN, YOUR TAX ACCOUNT (INCLUDING ARREARS) MUST BE PAID IN FULL AND HAVE A FULL ASSESSMENT.

Please sign name(s) _____

Date _____