



Township of Havelock-Belmont-Methuen
Pre-authorized Debit Plan Agreement - Water & Sewer

Utility Account Number: _____

Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone Number: _____ Email: _____

Account Number: _____

Branch Transit Number: _____ Financial Institution Number: _____

Please attach a void cheque or a Pre-Authorized transaction form available from your Financial Institution.

I/we authorize my/our financial institution and the Township of Havelock-Belmont-Methuen to begin deductions as per my/our instructions for monthly recurring payments, for all charges arising under my/our utility account on the last business day of each month. This authority is to remain in effect until the Township has received written notification from me/us of its change or termination at least ten business days before the next debit is scheduled. By placing a signature on this agreement I/we acknowledge that I/we have read, understand, and agree to all of the terms of the pre-authorized debit plan.

Signature of Account Holder: _____ Date: _____

Signature of Joint Account Holder: _____ Date: _____

Send completed form by mail, fax or email to:
Township of Havelock-Belmont-Methuen
PO Box 10, 1 Ottawa St. E., Havelock, ON K0L 1Z0
Email: kspooner@hbmtwp.ca
Fax: 705-778-5248
Telephone: 705-778-2308 Toll Free 1-877-767-2795