

## **UTILITY**

The Municipality of Brockton has the pre-authorized payment plan available to be withdrawn last banking day of the month for your utility account.



## **WHO IS ELIGIBLE?**

All utility customers in good standing are eligible to join the Utility PAP Plan.



### **HOW TO JOIN**

Joining the Plan is easy .....

1. Ensure that your utility account is paid up to date.
2. Complete the “Pre-Authorization Form” on the reverse side of this brochure.
3. Attach a **voided cheque** to your completed application form and mail to the address indicated on the front of this brochure.

**UTILITIES** include Water and Sewage Charges (if applicable).

### **Pre-Authorized Payment Plan**

Due date of the last banking day of the month is the date of withdrawal for all utility accounts.



### **TERMINATION OF THE PLAN**

If you wish to withdraw from the plan, please notify the Utility Department in writing 30 days prior to your next withdrawal date.

The Municipality of Brockton may cancel the privilege of continuing the plan if two payments fail to be honoured. Any unpaid balances due to a payment not being honoured shall be subject to penalties if overdue.

Please notify the Utility Department immediately at 881-2223 if you move or change your bank account.

---

## **E** **NOY THE BENEFITS OF** **PRE-AUTHORIZED CHEQUING**

- √ No Cheques to write
- √ No postage to pay
- √ No missed payments when on vacation
- √ Cheques no longer delayed in the mail
- √ Eliminate late payment charges



**I WANT TO REGISTER FOR THE UTILITY PRE-AUTHORIZED  
PAYMENT PLAN:**

**UTILITIES:**

NAME (s) \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_ PROV: \_\_\_\_\_ POSTAL CODE \_\_\_\_\_

TELEPHONE NO. (Home) \_\_\_\_\_ (Bus.) \_\_\_\_\_

UTILITY ACCOUNT NUMBER \_\_\_\_\_

I/we hereby authorize the Municipality of Brockton, PO Box 68, Walkerton,  
Ontario N0G 2V0 to debit my/our account number \_\_\_\_\_

Bank: \_\_\_\_\_ Transit No. \_\_\_\_\_

For the purpose of paying my municipal utilities at:

Property Location: \_\_\_\_\_  
(If Rural, Use 911 Number)

SIGNATURE (S) \_\_\_\_\_

(For joint accounts, all depositors must sign if more than one signature is  
required on cheques issued against the above account)

Date: \_\_\_\_\_

**NOTE: A voided cheque must be attached to this application**

**MUNICIPALITY OF  
BROCKTON**

Utility Department

PO Box 68  
Walkerton, Ontario  
N0G 2V0  
(519) 881-2223  
1-877-885-8084

**PRE-AUTHORIZED  
PAYMENT PLAN FOR  
UTILITIES**