



# PAWS AUTHORIZATION FORM



Property owner(s) name		<b>Office Use Only</b>		
		PAWS Acct #		
Property Address (Civic)		Posted by		Date
			PD	MX
Email		TX		
Phone	Cell	UB		

**ATTACH VOID CHEQUE HERE**

I/We hereby authorize:

NAME OF FINANCIAL INSTITUTION: \_\_\_\_\_

BRANCH ADDRESS: \_\_\_\_\_

Type of Chequing Account (Check One):  Chequing Savings  Personal Chequing (PCA)  Current

To debit my/our account for ten monthly payments per annum payable to:  
the Village of Anmore, 2697 Sunnyside Road, Anmore, B.C. V3H 5G9.

Your treatment of each payment shall be the same as if I/we had personally issued a cheque authorizing you to pay as indicated and to debit the amount specified to my/our account.

This authorization may be cancelled any time by providing 10 days written notice.

Delivery of this authorization to you constitutes delivery by me/us.

**Property Taxes** Roll # \_\_\_\_\_ Monthly Payment Amount \$ \_\_\_\_\_

**Utilities** Account # \_\_\_\_\_ Monthly Payment Amount \$ \_\_\_\_\_

For a joint account, all depositors must sign if more than one signature is required for cheques issued against the account.

\_\_\_\_\_  
Account Holder's Signature                      Print Name                      Date (mm/dd/yyyy)

\_\_\_\_\_  
Joint Account Holder's Signature (if applicable)                      Print Name                      Date (mm/dd/yyyy)

For verification purposes, please enclose one of your personal cheques marked **"Void"**.