



Town of Iroquois Falls

Town Hall - 253 Main Street - P.O. Box 230
IROQUOIS FALLS, Ontario P0K 1G0

TELEPHONE (705) 232-5700
FAX (705) 232-4241

PROPERTY TAX – PRE-AUTHORIZED PAYMENT PLAN

Looking for an alternative to post-dated cheques? Need reminders to assure payments are submitted on time? Looking for a method to aid with budgeting? We offer pre-authorized banking withdrawals to avoid late fees and penalties. The following pre-authorized payment plans are available;

Instalment Plan

Annual taxes are withdrawn four times a year on instalment due dates. (2 based on interim and 2 based on final)

Semi-Annual Plan

The Interim total and the Final total are withdrawn on the first listed instalment date of that billing.

10 Month Plan*

Annual taxes are withdrawn over a 10-month period on the 3rd business day (March to December) or last business day (February to November) of each month. (5 based on Interim and 5 based on Final)

Equal Monthly Plan*

12 monthly withdrawals on the 3rd or last business day of each month – only available if account is in arrears - accounts are subject to penalties on any outstanding balance

* All withdrawal amounts will be printed on your bill on the bottom stub portion for your reference.

Please note the following payment options are still available:

CHEQUE via Regular Mail or Off-Hours Deposit Box - Town Hall (front door)

CASH or CHEQUE or DEBIT over the counter at Town Hall

ELECTRONIC BILL PAYMENTS including ATMs, phone and internet systems at the following financial institutions: Caisse Populaire, Scotiabank, RBC, CIBC, Credit Unions of Ontario

How do I join?

1. Complete and sign the Enrollment/Authorization Form on other side
2. Attach your personal cheque marked “**Void**”
3. Send form and cheque by mail or drop off at the Town Hall (drop box during off-hours)

Once enrolled, this authorization will remain in effect until you cancel in writing.

QUESTIONS? Please call us at 232-5700.



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PRE-AUTHORIZED PAYMENT ENROLLMENT

Authorization Form

Name: _____

Roll Number: _____

Bank Account Number: _____

Property Address: _____

Telephone Number: _____

Choose one of the following:

- Instalment Plan – four payments per year (as per billing)**
- Semi-Annual Plan – two payments per year (as per billing)**
- 10 Month Plan**
 - 3rd business day (March to December)
 - last business day (February to November)
- Equal Monthly Plan – Equal amount of \$_____ each month***
(only available if account is in arrears)
 - 3rd business day
 - last business day

* I understand late penalty will be charged on outstanding amounts – initial here:

I hereby authorize the Town of Iroquois Falls to debit the bank account above by the specified amount on the dates indicated until further notice.

I am aware there will be a \$20.00 N.S.F. service fee for any returned payments due to insufficient funds in my account.

Date

Signature

For Office Use Only:
Start Date: _____

Entered in System: _____