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PRE-AUTHORIZATION DEBIT (PAD) APPLICATION FORM

Customer Name(s):		
Service Address:		
Telephone:		Email:
Aquatera Account Number:		
Banking Information (Please attach either a personalized void cheque or direct debit form provided by your bank)		
Transit Number (5 digits):		Branch Number (3 digits):
Account Number:		

TERMS AND CONDITIONS

This authorization is to remain in effect until Aquatera Utilities Inc. has received written notification from me/ us of its change or termination. Notification must be received at least seven (7) business days before the next withdrawal is scheduled, otherwise the change/termination date will be processed for the following billing cycle.

I/We understand to continue to make payments on my/our account in the usual manner until the automatic withdrawal message appears on my bill.

I/We acknowledge that Aquatera Utilities Inc. may charge my utility account with a service charge for each dishonoured payment and that it may also result in termination of my participation of automated monthly withdrawals.

By submitting this form, I/We authorize Aquatera Utilities Inc. to begin automated withdrawals from my bank account for payment on my monthly utility bill.

Signed: _____

Date: _____

Completed forms can be sent by email, fax or dropped off in person to have your account(s) set up on automated withdrawal.