



**THE RURAL MUNICIPALITY OF SPRINGFIELD**  
P.O. Box 219, Oakbank, Manitoba ROE 1J0  
PH: 444-3321 FAX: 444-2137  
**PROPERTY TAXES**  
**PREAUTHORIZED PAYMENT PLAN**  
**APPLICATION**

APPLICATION(S) NAME: \_\_\_\_\_

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

\_\_\_\_\_ Postal Code \_\_\_\_\_

Res. No. \_\_\_\_\_ Bus No. \_\_\_\_\_

ROLL NUMBER: \_\_\_\_\_

CIVIC ADDRESS (LOCATION): \_\_\_\_\_

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

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

ACCOUNT NUMBER (include transit number) \_\_\_\_\_



I/We the applicant(s) authorize my/our above named financial institution to electronically debit my/our account for the monthly tax instalment payment payable to Rural Municipality of Springfield on the 15<sup>th</sup> day of each month as payment in part of the taxes for the above named property. The treatment of each payment shall be the same as if the undersigned had personally issued a cheque.

I/We acknowledge the right of Rural Municipality of Springfield to cancel my/our participation in the payment plan if any debits are not honoured by the participant's financial institution. Unpaid taxes as of the date of termination of participation in the plan are subject to penalties as per the penalty by-law.

I/We acknowledge there may be adjustments in the amount of the monthly payment on August 15<sup>th</sup> for Property Taxes each year as a result of the Rural Municipality of Springfield's annual tax levy.

I/We agree to provide **two weeks notification in writing** if I/We change bank information, sell the property, or wish to cancel participation in the plan for any reason. It is further agreed this notification to cancel the preauthorized payment may be provided by an agent acting on my/our behalf.

New charges for supplementary taxes and omitted assessments (for improvements or new construction) or outstanding charges added to the tax roll (throughout the year) are not included in the plan. **They must be paid for as they become due.**

Attached is a personal void cheque. Any account that requires two signatures must have the same on this application form.

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature