

INTEREST-FREE PRE-AUTHORIZED INSTALLMENTS FOR TAXES & LOCAL IMPROVEMENT CHARGES						
New Author		Change in Bank Information				
payment due. The City will no form with a voided cheque be the cheque be	s simple to use and allows ments from January to Jun to 1/6 of the balance due otify you if the amount chary: Faxing to 867-9: Emailing to tax Dropping off at	you to pay the are equal to on the Ju anges. To e 20-5649 (nation@yell City Hall o	your taxes al to 1/12 c ne tax bill. enroll in this cocover she lowknife.ca r Mail to Pe	and Local Impro of the previous y LIC installment s service, please eet required) or a or D Box 580, Yello	vemer ear's t es are compl	nt Charges (LIC) interest-free axes. Tax Installments from equal to 1/12 of the annual ete and submit the following
 Payments are only by automatic bank withdrawal on the last business day of each month. All outstanding taxes and any other charges must be paid by December 31st of the preceding year or June 30th. Your tax account is allowed to include only the current year's taxes. The installment plan will be discontinued if any other charges, such as unpaid utility charges, are added to your account. Customer Information						
Roll Number						
Assessed Owner(s)						
Municipal Address Contact Name(s)						
Residence Phone		Email				
Business Phone		Cell			Fax	
Dusiness i none		Cen			ı ux	
Bank Withdrawal						
Account Holders Name						
Bank Name						
Branch/Transit Number	Bank Number			Account Numb	oer	
I/We (the above owner(s)) aut if I/we had personally issued my/our account. I/We will no there is any other change in t City. Any delivery of this authorequired to sign on the above a	a cheque authorizing the tify the City promptly in w he account. This authoriz orization to the City constit	Bank to pariting if I/wation may tutes delive	ay the City ve move th be cancelle ery by me/u	as indicated an e account from o ed at any time u us to the Bank. I,	d to done ba	lebit the amount specified to ink or branch to another, of if ritten notice by me/us to the
	Signature			Date		
For Office Use Only						
Start Date:	Installme				_	

Clerk Initials:_____

Date Processed: _____

Customer ID:____