



# Water Wastewater Billing

## Pre-Authorized Payment Plan

Fields marked with \* are required

### How to enroll:

1. Complete and sign the form.
2. Enclose a VOID cheque (Line of credit cheque will not be accepted).
3. Mail, fax, email or drop off to the number/address below.

### Select one: \*

- Apply for a Pre-Authorized Payment Plan
- Change information on existing Pre-Authorized Payment Plan
- Cancel the Pre-Authorized Payment Plan effective: \_\_\_\_\_ (mm/dd/yyyy)

Water Customer Account Number (found on top of water bill)	
Service Address	
Names on Account* (1)	(2)
Mailing Address (Number & Street) *	Unit or Apt Number *
City/Town & Province *	Postal Code *
Phone Number *	Alternate Phone Number
Email Address	

I/we authorize the Town of Espanola to process a debit equivalent to the actual amount due as billed on the due date. This authority is to remain in effect until the Town of Espanola has received written notification from me/we of a change or termination.

Signature (1) *	Print Name(s) *
Signature (2)	
Date: (mm/dd/yyyy) *	

Fax: 705-869-0083  
Phone: 705-869-1540  
Email: towns@espanola.ca  
Website: www.espanola.ca

By mail or in person: Town of Espanola  
100 Tudhope Street, Ste 2  
Espanola , ON P5E 1S6