



Revenue Branch  
 1435 Water Street  
 Kelowna, BC V1Y 1J4  
 250 469-8757  
 kelowna.ca/propertytax

# Pre-Authorized Withdrawal System<sup>PAWS</sup> Application Form

**All outstanding property taxes must be PAID IN FULL prior to joining the plan.**

Please print clearly. Do not complete if you are currently enrolled.

First Name:		Last Name:	
Property Address:		Start Date: ____/____/____ YEAR MONTH DAY	
Folio Number:		Email:	
Home Phone:	Work Phone:	Cell Phone:	

## ELIGIBILITY FOR HOME OWNER GRANT

**Check One**     A. Not Eligible     B. Under 65     C. 65+ and other    Year of Birth \_\_\_\_\_

## PREPAY NEXT YEAR'S TAXES

Each payment shall be treated as if the City of Kelowna had received a cheque for payment. The amount is subject to change each year and will be withdrawn monthly from July 10 to May 10. Your tax notice will indicate the amount of your new payment for the next tax year. The minimum withdrawal amount is \$10.00. This monthly payment will be calculated as follows:

	Last Year's Gross Taxes:	\$ _____	
LESS:	Home Owner Grant Claimed:	\$ _____	<b>Claim Grant by Tax Due Date</b>
EQUALS:	Net Taxes:	\$ _____ / _____ = \$ _____	<b># of Months      Monthly Withdrawal</b>

**Please read and initial below, and enclose one of your cheques marked "VOID" or a Pre-Authorized debit form.**

\_\_\_\_\_  
 Initial I/we acknowledge that all outstanding taxes have been/will be paid by the due date and that my enrolment in the pre-authorized withdrawal system will apply to next year's taxes.

\_\_\_\_\_  
 Initial I/we authorize the City of Kelowna to debit my/our account on or after the 10th of each month from July to May inclusive each year until I/we advise otherwise. Your treatment of each payment shall be the same as if I/we had personally directed you to pay as indicated and to charge the amount specified to the account of the above signed. This authorization may be cancelled upon notifying the Revenue Branch.

\_\_\_\_\_  
 Initial I/we understand that there is no withdrawal taken from my/our bank account in the month of June. I/we have to make the final payment and, if eligible, claim the Home Owner Grant by the tax due date to avoid penalties.

\_\_\_\_\_  
 Initial I/we understand that the current charge for dishonoured payments will apply. Subsequent dishonoured payments may result in my/our removal from PAWS.

\_\_\_\_\_  
 Initial I/we understand that it is my/our responsibility to provide written or electronic notification to the Revenue Branch when there are changes to my/our PAWS account or when cancelling enrolment in PAWS. There are no refunds under this plan; overpayments will be applied to next year's taxes.

\_\_\_\_\_  
 Initial I/we understand that in the event we sell my/our property, I/we or my/our lawyer MUST terminate PAWS by providing written or electronic authorization to the Revenue Branch, on or before the first of the month, in order to stop the withdrawal on the 10th. The sale of the property does not automatically stop the PAWS payments. All prepayments remain on the property tax account and should be adjusted through the lawyer's statement of adjustments; otherwise a refund of overpayment can be requested which is subject to a \$25.00 service charge.

\_\_\_\_\_  
 Initial I/we agree that ALL persons whose signatures are required to sign on the Financial Institution Account have signed the Authorization Form.  
**I HAVE READ AND UNDERSTAND THE TERMS OF THE PRE-AUTHORIZED WITHDRAWAL SYSTEM**

\_\_\_\_\_  
 SIGNATURE OF SIGNING AUTHORITY      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 YEAR MONTH DAY

\_\_\_\_\_  
 SIGNATURE OF SIGNING AUTHORITY      Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 YEAR MONTH DAY

OFFICE USE:

Taken By	
Entered By	
Taxes	
Mort. Code	

## APPLY

Forward your application to: Revenue Branch, City Hall, 1435 Water Street, Kelowna, BC V1Y 1J4, fax 250 862-3391 or email revenue@kelowna.ca.