



Utility Billing Revenue Branch
1435 Water Street
Kelowna, BC V1Y 1J4

utilitybilling@kelowna.ca
250-469-8757 by phone
250-862-3391 by fax
kelowna.ca/utilities

Utility Billing
Pre-Authorized Withdrawal System (PAWS)
For South East Kelowna Utility Customers

Beginning in the fall of 2019, your utility billing frequency will change from quarterly or monthly to bi-monthly. If you are currently enrolled in the pre-authorized debit plan with South East Kelowna Irrigation District, **you must OPT IN** to enrol in the City's Pre-Authorized Withdrawal System (PAWS). Please check the **OPT IN** box below and sign where indicated.

If you are not currently enrolled in the pre-authorized debit plan with South East Kelowna Irrigation District, you can use the form on the reverse of this letter to enrol in the City's Pre-Authorized Withdrawal System (PAWS). It must be signed and accompanied by either a blank cheque marked VOID or a Pre-Authorized Debit form from your bank

Final pre-authorized debit for quarterly billing: August 30, 2019 for the quarter 3 billing period of July 1 to September 30, 2019.

First PAWS payment for bi-monthly billing: January 13, 2020 for the bi-monthly billing period of October to November 2019.

I WISH TO OPT IN TO REMAIN ENROLLED IN THE PAWS PROGRAM

I am currently enrolled in the pre-authorized debit plan with South East Kelowna Irrigation District and wish to remain enrolled when my billing frequency switches to bi-monthly starting with the billing period of October to November 2019.

Name on SEKID Utility Account _____ SEKID Utility Account Number _____

Civic address on SEKID Utility Account _____

Telephone number _____ Email address _____

The payment amount will be deducted from your account on the payment due date on your City of Kelowna Utility bill. You do not need to complete the form on the reverse of this letter unless you require changes to the information currently on file with South East Kelowna Irrigation District.

For joint accounts, if more than one signature is required on cheques, then more than one signature must be included on this application.

Pre-authorized payments that are returned by your Financial Institution will result the City of Kelowna's standard service charge being added to your Utility Billing Account, in addition to any charges from your Financial Institution.

More than one (1) returned pre-authorized payment may result in the removal of this account from the Plan.

Date

Signature of Signing Authority

Signature of Signing Authority

FOR OFFICE USE:

Confirmed:



Utility Billing Revenue Branch
 1435 Water Street
 Kelowna, BC V1Y 1J4

utilitybilling@kelowna.ca
 250-469-8757 by phone
 250-862-3391 by fax
 kelowna.ca/utilities

Utility Billing
Pre-Authorized Withdrawal System (PAWS)
 Information Sheet

I wish to enrol in the Pre-Authorized Withdrawal System when my billing frequency switches to bi-monthly for the billing period of October to December 2019; first payment date being January 13, 2020 (please complete the following form)

UTILITY BILLING ACCOUNT HOLDER INFORMATION:

| | | | | | |
|--|--|-------------|-------|----------------|--------------|
| | | START DATE: | | OWNER (Y / N): | |
| First Name: (or Corporate name if applicable): | | Initial: | | Family Name: | |
| Mailing Address: | | | City: | Province: | Postal Code: |
| Service Address: <i>(if different from mailing)</i> | | | City: | Province: | Postal Code: |
| Home Phone: | | Work Phone: | | | |
| City of Kelowna Utility Billing Account Number: | | Email: | | | |

FINANCIAL INSTITUTION INFORMATION:

| | |
|----------|------------------------|
| NAME: | FOR OFFICE USE: |
| ADDRESS: | Bank #: |
| | Branch #: |
| | Account #: |

- 1) In this Authorization, "I", "me", and "my" refer to each Account Holder(s) who sign below.
- 2) I agree to participate in this pre-authorized payment plan and I authorize the City of Kelowna billing services to draw a debit, in paper, electronic, or other form (a "Pre-Authorized Withdrawal"), on my account indicated above (Account Number), at the Financial Institution indicated above for the purpose of utility bill payments, in accordance with the terms and conditions herein.
- 3) I may revoke this Authorization by contacting Utility Billing customer care in writing, twenty (20) days in advance of my next payment due date. I agree that revocation of this Authorization does not terminate any contract that exists between myself and the City of Kelowna concerning my utility account.
- 4) I agree to promptly inform the City of Kelowna of any change in Financial Institution Account information.
- 5) I agree that ALL persons whose signatures are required to sign on the Financial Institution Account have signed the Authorization below.

Please include a blank cheque, with the word "VOID" written across it.

For joint accounts, if more than one signature is required on cheques, then more than one signature must be included on this application.

Pre-authorized payments that are returned by your Financial Institution will result the City of Kelowna's standard service charge being added to your Utility Billing Account, in addition to any charges from your Financial Institution.

More than one (1) returned pre-authorized payment may result in the removal of this account from the Plan.

FOR OFFICE USE:

Confirmed:

Date

Signature of Signing Authority

Signature of Signing Authority