



Smoky Lake County

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Smoky Lake, Alberta
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PLEASE NOTE:

For eligibility Smoky Lake County must receive this form no later than the 15th day of November.
The current year's taxes, local improvement levies plus any tax arrears must be paid in full for eligibility in the plan.

PRE-AUTHORIZED DEBIT FORM PROPERTY TAXATION MONTHLY PAYMENT PLAN

Roll Number: _____ Legal Description: _____

Name and Mailing Address of Property Owner: _____

New Authorization:
Change in Bank Info:

FINANCIAL INSTITUTION OF PROPERTY TAXPAYER

Name of Financial Institution		Branch Address	
City	Province	Postal Code	
Institution Number	Branch Number	Account Number	

1. I/we hereby authorize Smoky Lake County and its Financial Institution to debit my account listed above:
 - for all property taxes including any local improvement levies payable to Smoky Lake County
 - in the amount of the previous years taxes divided into 12 monthly installments, on the **TWENTIETH** day of each month beginning with January 20.
 - and which amount may increase or decrease to the amount shown on the annual property Tax Notice issued by Smoky Lake County for the remaining installments to be paid that year.
2. A specimen cheque, marked "VOID", must be attached to this authorization.
3. This authorization may be cancelled any time upon two weeks written notice by me/us, and all outstanding taxes become due and payable and subject to penalties.
4. Any payment returned may result in termination of the plan, and all outstanding taxes become due and payable and subject to penalties.
5. In the event of a sale of the above noted property or a change in bank accounts, I/we will notify the Smoky Lake County in writing at least 15 days prior to the next due date, to arrange for cancellation, or to provide the new bank account information and a cheque marked "VOID".
6. Any delivery of this authorization to you constitutes delivery by me/us.
7. All persons whose signatures are required to sign on this bank account have signed their agreement below.

Signature	Signature
X	X
Date	Phone Residence Phone Business

For Office Use Only

Start Date: _____	Initial Installment Amount: \$ _____
Date Processed: _____	Clerks Initials: _____
	Owner Number: _____