

PROPERTY TAX PREPAYMENT PLAN AUTHORIZATION FORM

Effective date: 10 / MM / YYYY

See payment schedule on reverse.

Tax Folio: _____

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Civic Address: _____

Payment Calculation for initial year (optional, if blank, staff will complete)

Prior Year Gross Levy: \$_____ *Column A, Total New Taxes.*

Less Existing Installments: \$_____ *Or other account adjustments.*

Less Home Owner Grant: \$_____ Grant Type: ☐ *Additional* ☐ *Regular*

☐ *initial* Add Voluntary adjustment: \$_____ *(Up to 5% of gross levy.)*

= Net Installments to be made: \$_____

Divide by # of remaining payments _____ = \$_____ monthly payment.

TO COMPLETE ENROLLMENT:

1. Read and initial each box below. Print name, sign, and date this agreement.
2. Attach "VOID" cheque, or Direct Deposit / Pre-Auth Debit form from your financial institution.
3. Submit both to City Hall at 3400 30 ST, or by email to covdata@vernon.ca.

☐ *Initial*

I hereby authorize the City to deduct payments from my bank account on the 15th of each month, for the months of August through May. I understand this amount be automatically recalculated annually.

☐ *Initial*

I hereby authorize the City to deduct payment of all outstanding property tax remaining on this account, from my bank account, on the due date of July 2nd each year.

☐ *Initial*

I understand it is my responsibility to claim the Home Owner Grant, if eligible, with the Province of BC annually by June 15th. Late claims may result in outstanding grant amounts being withdrawn on July 2nd.

☐ *Initial*

Voluntary adjustments are not captured in automatic annual recalculation, I understand I will need to request a manual recalculation each year I wish to add a voluntary adjustment.

☐ *Initial*

A service charge of \$25 applies for each returned payment. Consecutively returned payments will result in removal from the program.

☐ *Initial*

NO REFUNDS of payments made through this program will be provided upon request. After the due date, credits on account due to overpayment will be automatically returned by direct deposit, mid-July.

☐ *Initial*

Cancellation and change requests must be submitted in writing prior to the 10th day of the effective month. The sale of a property does not automatically stop payments. This program continues until I provide written notice to cancel.

Print Name: _____ Signature: _____ Date: _____

Personal information is collected for the purposes of processing this authorization. The City of Vernon is collecting this information under s.26 of the Freedom of Information and Protection of Privacy Act. For any questions regarding the collection of personal information, please contact the FOI Clerk at foirequest@vernon.ca or 250-545-3491.

PROPERTY TAX PREPAYMENT PLAN SCHEDULE

