



Town of Battleford  
PO Box 40, Battleford, SK, S0M 0E0  
Ph: 306-937-6200 Fx: 306-937-2450

## WATER INSTALLMENT PAYMENT PLAN SERVICE (W.I.P.P.S) Pre-Authorized Payment (PAP)

Customer Information: (Please Print Clearly)

Last Name/First Name

Mailing Address:

Phone Number/Alternate:

Monthly Amount / Start Date:

*Debit the bank account identified in said amount below*

Utility Information

Civic Address:

Utility Account Number:

\$

Effective:

☐ 2 of each month or ☐ 16 of each month

*If your chosen day falls on a weekend, your payment will be taken the next business day.*

Statement of Applicant:

I, the account holder of the above noted property, hereby grant the Town of Battleford permission to withdraw, from the bank account I have specified, the necessary funds for the payment of the utilities. I understand that if a payment is cancelled due to Insufficient Funds, that I will be charged a service and processing fee of \$25.00. I also understand that such administrative fees are subject to change by Town Council without direct notice. I understand I must notify the Town in writing no less than ten days prior to the payment date should I wish to change accounts or discontinue W.I.P.P.S.

Signature of Applicant(s):

Signature of Town of Battleford Agent:

Date:

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- \* After two (2) Insufficient Funds payments, the plan will be cancelled by the Town of Battleford
- \* The utility account must be current to qualify for this program.
- \* In the event of a change of residence, or a change in bank account, it is the responsibility of the property resident to immediately notify the Town Office. (306-937-6200)