



PRE-AUTHORIZED PAYMENT AGREEMENT

Personal Pre-Authorized Debit Plan

Authorization of the Payor to the Payee to Direct Debit an Account

Instructions:

1. Please complete all sections in order to instruct your financial institution to make payments directly from your account.
2. Return the completed form with a blank cheque marked "VOID" to the Payee.
3. If you have any questions, please write or call the Payee, Rentals 101 (905)641-0911.

PAYOR INFORMATION (please type or print clearly)

Payor Name(s):	
Address:	
Telephone:	
Signature:	Date:

****By signing above, I, the Payor, authorize the Payee to debit my bank account for payment as indicated. I understand that my financial institution is not responsible for verifying these payments from my account. I will notify the Payee promptly in writing if I close or make other changes to my account. I may cancel this authorization at any time in writing to the Payee, however, I am still responsible for my contract obligations to the Payee.***

PAYOR FINANCIAL/BANKING INFORMATION (please type or print clearly)

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



PAYEE INFORMATION

Payee Name(s): <i>Rentals 101</i>	
Address: <i>140 Lake Street, St. Catharines, Ontario L2R 5Y1</i>	
Telephone: <i>905-641-0911</i>	Email: <i>info@rentals101.ca</i>

PAYMENT INFORMATION (please type or print clearly)

Please specify whether the payment is a: (please circle one)	<input checked="" type="checkbox"/> <i>Fixed Amount:</i> (Please specify) \$ _____
	<input checked="" type="checkbox"/> <i>Variable Amount:</i> If variable, please specify whether there is a maximum amount or indicate N/A if there is no maximum amount: \$ _____
Occurring at:	<input checked="" type="checkbox"/> <i>Set intervals:</i> Please specify the timing (i.e. weekly, bi-weekly, monthly) _____
	<input checked="" type="checkbox"/> <i>Sporadic:</i> The Payor must describe the occurrence of an Event or other criteria that will trigger the debit amount. _____ _____ _____
Are top-ups or adjustments permissible? (please circle one)	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No