

**WYSE METER SOLUTIONS**

Enrolment Centre
 PO Box 418 RPO Steeles West
 North York, ON M3J 0J3
 Toll free: 1.844.411.0663
 Fax: 1.844.700.7673
 enrolment@wyseutilities.com

For your convenience, Wyse can arrange for your monthly bill to be paid automatically by Pre-Authorized Payment (PAP) from your bank account. To authorize this service, please complete the following form and submit it, along with a blank cheque marked 'VOID', to the Wyse Enrolment Centre at PO Box 418 RPO Steeles West. North York, ON M3J 0J3

- If PAP is chosen, security deposit may or may not be reduced. If NOT chosen, security deposit will be full amount. Security deposit will be added to first billing.** I/We hereby authorize Wyse and the financial institution designated below (or any other financial institution I/we may authorize at any time) to being deductions from the account shown below for monthly regular recurring payments and/or one---time payments from time to time as per my/our instructions, for payment of all charges arising under my/our Wyse account(s). Regular monthly payments for the full amount of services delivered will be debited to my/our specified account on the due date printed on your invoice. Wyse will obtain my/our authorization for any other one---time or sporadic debits.

- I/We hereby authorize Wyse to draw the amount of the security deposit as required. This amount will precede any amounts required for the monthly payment.

OWNER NAME			
FULL ADDRESS			
THIS IS YOUR AUTHORIZATION TO HONOUR PAYMENTS DRAWN ON:			
FINANCIAL INSTITUTION (3 digits)		BRANCH (5 digits)	
ACCOUNT NUMBER (7 or more digits):			
BANK NAME & FULL ADDRESS			
TYPE OF ACCOUNT	<input type="checkbox"/> CHEQUING <input type="checkbox"/> SAVINGS <input type="checkbox"/> OTHER	TYPE OF SERVICE	<input type="checkbox"/> PERSONAL <input type="checkbox"/> BUSINESS
SIGNATURE (if this account has multiple authorized signers, all must sign)		DATE	

** Notification of change or revocation of the PAP authority granted herein must be received at least 30 business days before the next debit is scheduled at Wyse's address above. You may obtain a sample cancellation form or more information on your right to cancel a PAP Agreement at your financial institution or by visiting www.cdnpay.ca. You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAP Agreement. To obtain more information on your recourse rights, you may contact your financial institution or visit www.cdnpay.ca.