



Pre Authorized Debit (PAD) Agreement Form
(Client's Option)

Client Information (please print clearly)

Name: _____

Renway Account Number: _____

Street Address: _____

City: _____ Province: _____ Postal: _____

Telephone: _____ Facsimile: _____

Bank Account Information

Financial Institution Name: _____

Branch Address: _____

Deposit Account Number: _____ Branch Transit Number: _____

Financial Institution Number: _____ (check one) Chequing Savings

Note: Please submit a copy of a VOID cheque along with this form.

The PAD will be used for a (check one) _____ personal _____ business account.

You the Customer/Payor authorize Renway Energy to debit the above listed account as per your payment terms of 15 days; invoices dated up to the 15th of the month will be withdrawn at the end of the same month; invoices dated up to the end of the month will be withdrawn on the 15th of the month following.

Should a debit that does not fall within the parameters of the PAD agreement take place, you, the Customer/Payor, are entitled to reimbursement of that debit. Information regarding recourse rights can be obtained at your financial institution or www.cdnpay.ca

It is your right as the Customer/Payor to revoke/cancel the PAD agreement, subject to providing notice of not less than 10 business days. Sample cancellation forms and cancellation information can be obtained at your financial institution or www.cdnpay.ca

Signature of Account Holder

Signature of Joint Account Holder (if applicable)

Name (please print)

Name (please print)

Date

Date

Once this form is complete, please forward to:

Renway Energy, 56 Henry St., Brantford, ON N3S 7J4

Tel: 519-752-6777 Fax: 519-752-7293 Toll Free: 1-888-553-5550 Kelly@renwayenergy.com