



## FOOTHILLS COUNTY

309 Macleod Trail, Box 5605  
High River, Alberta T1V 1M7  
Tel: 403-652-2341 Fax: 403-652-7880  
[www.mdfoothills.com](http://www.mdfoothills.com)

### UTILITIES Pre-Authorized Debit Form

Name & Mailing Address:	Email Address:
	Phone (Res):
	Phone (Other):
	Fax:
Utility Account No (If more than one, please list all)	Service Address (If more than one, please list all)
Outstanding Balance:	

<p align="center"><b>Please select your payment plan (mark one choice below with an X).</b> <b>Please sign and date this application, and return it to us with a void cheque at your earliest convenience.</b></p>	
<input type="checkbox"/> Utility Bi-Monthly Payment Plan (WPAP)	<input type="checkbox"/> Utility Monthly Payment Plan (WIPP) <b>Monthly Budget Amount:</b>
I hereby authorize Foothills County to debit my bank account for the <b>full amount</b> of each utility bill. This withdrawal will occur on the <b>1<sup>st</sup> or 15<sup>th</sup> day of the month following the billing date.</b>	I hereby authorize Foothills County to debit my bank account for the monthly budget amount as shown above. This withdrawal will occur <b>on the 1<sup>st</sup> or 15<sup>th</sup> day of each month.</b>

**Date on which you wish to have the first payment withdrawn from your bank:** \_\_\_\_\_

### Terms and Conditions

- Two weeks written notice is required to cancel this authorization.
- Any payments returned N.S.F. may result in termination of the plan.
- If the plan is terminated, all outstanding amounts will become due and subject to penalties.
- Nothing in this agreement shall be interpreted to relieve the owner/applicant from the obligation to pay any utility charges, including penalties, owing to Foothills County.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*Personal information is collected for Utility Billing purposes only and is collected under authority of Section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP).*



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### UTILITY INVOICE PAYMENT OPTIONS

The Bi-Monthly Payment Plan (WPAP) will authorize us to automatically withdraw the full amount of your utility invoice on the 1<sup>st</sup> or 15<sup>th</sup> day of the month following the billing date. For example, if we send you a utility bill in the amount of \$200.00 on January 8<sup>th</sup>, we will withdraw the full amount of the bill (i.e. \$200.00) from your bank on February 1<sup>st</sup> or February 15<sup>th</sup>.

The Monthly Budget Payment Plan (WIPP) authorizes us to automatically withdraw a fixed amount on either the 1<sup>st</sup> or 15<sup>th</sup> day of each month. We will review your account balance every 6 months, and if necessary, a new monthly budget amount will be recalculated, and the new amount will be shown on your next invoice.

Attached is an application form for either program. Mark the option that you wish to participate in, sign and date the form. Enter the month/year you wish to start, attach a VOID cheque or a Direct Withdrawal Authorization form from your bank, and return the application to us. You may deliver, mail, fax, or scan and email the completed forms.

Please contact me if you have any questions.

Yours truly,  
FOOTHILLS COUNTY

Toni Groeneveld  
Utility Clerk  
Phone: 403-603-6212  
[Utilities@foothillscountyab.ca](mailto:Utilities@foothillscountyab.ca)