

PRE-AUTHORIZED PAYMENT MODIFICATION FORM

Corporation of the City of Belleville

169 Front Street BELLEVILLE, ON K8N 4M1 Phone: 613-967-3243 Fax: 613-967-3206

www.belleville.ca
Email: tax.info@city.belleville.on.ca

TAXATION ROLL NUMBER: 1208 –
DATE (MM/DD/YYYY) NAME :
EMAIL ADDRESS:
CURRENT BANK :
PLAN TYPE
EFFECTIVE DATE of MODIFICATION (MM/DD/YYYY) :
NOTE: Form and Void Cheque / Bank Authorization must be submitted fifteen (15) days before next payment.
ADDITIONAL COMMENTS:
APPLICANTS SIGNATURE
CO-APPLICANTS SIGNATURE

Please PRINT this THIS FORM
Ensure that you affix you Signature(s)
SUBMIT COMPLETED FORM:
Mail or Drop off your completed form
along with a Void Cheque / Bank Authorization to
City of Belleville Taxation Department
169 Front Street
BELLEVILLE, ON K8N 2Y8

NOTE: If your application is setup on a Joint Bank Account, the co-applicant must also sign for this request to be processed.

or

Fax this Form along with a Void Cheque / Bank Authorization to the attention of the TAXATION DEPARTMENT

Personal Information on this form is collected under the authority of the Municipal Act 2001, SO 2001, c25 will be used to process your **Pre-Authorized Payment Plan Modification** request. Questions about the collection of this personal information only should be directed to the Manager of Revenue & Taxation, Taxation Department, 169 Front Street, Belleville, ON K8N 2Y8 613-967-3243