

AUTHORIZATION FORM - PAGE 1



Please complete BOTH pages of the
Pre-Authorized Debit (PAD) Agreement Below

Please check one choice:

- ☐ PRE-AUTHORIZED CHEQUING PLAN ONLY
- ☐ PRE-AUTHORIZED CHEQUING EQUAL PAYMENT PLAN
- ☐ EQUAL PAYMENT PLAN ONLY

CUSTOMER INFORMATION

Date:

Electricity Account #:

Account Holder's Name:

Email Address:

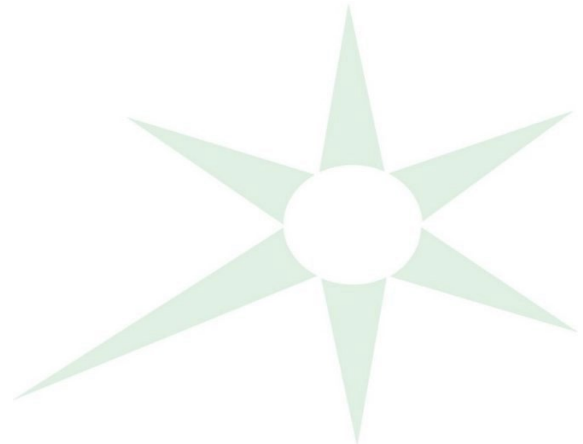
Service Address:

City:

Province:

Postal Code:

Phone #:



Please complete PAGE 2 ►

AUTHORIZATION FORM - PAGE 2



Please complete BOTH pages of the
Pre-Authorized Debit (PAD) Agreement Below

ELECTRICITY BILLING

I/We hereby authorize Niagara Peninsula Energy Inc. to debit my/our account indicated above for the purpose of paying electric bills. Regular monthly payments for the full amount due will be debited to my/our specified account on the due date of the bill. Niagara Peninsula Energy Inc. will provide at least ten (10) days written notice of the amount of each regular debit as specified by the bill.

This authority is to remain in effect until Niagara Peninsula Energy Inc. has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit / direct deposit is scheduled at the address provided below.

Niagara Peninsula Energy Inc. may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 days prior written notice to me/us.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca

Date: _____

Signature: _____

Signature: _____

Please enclose one of your personal cheques marked "VOID" or a Pre-Authorization Form provided directly from your financial institution. For a joint account, all depositors must sign if more than one signature is required on the cheques issued against the account. A signature is required for the Equal Payment Plan only option; however, no banking information is required.

Please mail the completed form to:

**Niagara Peninsula Energy Inc.
7447 Pin Oak Drive, Box 120
Niagara Falls, Ontario L2E 6S9**

or Email to: billing@npei.ca