



Head Office:

#33 2688 Blanche Street
Vancouver BC V5S 4R4

Telephone: 604.431.9225

Email: accounting@reddoorhousing.ca

Pre-authorized Debit (PAD) Agreement

1. Payor Information (Please print clearly)

Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone Number: _____

2. Bank Account Information

Payor Account Number:

Debit Amount: \$ _____

Branch Transit Number:

Financial Institution Number: Chequing Savings

Financial Institution: Name _____

Branch Address _____

Transaction Date: From: ____/____/____ To: ____/____/____
mm dd yyyy mm dd yyyy

Please attach a void cheque.

These services are for (check one): Personal Business Use

Frequency of each pre-authorized debit ("PAD"): Monthly One-time* Sporadic**

If PADs occur monthly: Regular monthly payments for the full amount of services delivered will be debited from my/our specified Account on the 1st day of each month. These services are for rent payment of all charges arising under my/our Red Door Housing Society account(s)

* If this PAD occurs on a one-time basis, this PAD Agreement will no longer be valid once the payment has been fulfilled. For any subsequent PAD, Red Door Housing Society, shall obtain a new payor's PAD agreement and due authorization from me/us in accordance with rule H1 ("Rule H1") of the Canadian Payments Association ("CPA", operating as Payments Canada).

** For any PAD(s) that occur(s) on a sporadic basis, Red Door Housing Society shall obtain due authorization from me/us in accordance with Rule H1 for each PAD that Red Door Housing Society issues against me/us.

3. Pre-Authorized Debit Details

Authorization: I/We acknowledge that this PAD Agreement is provided for the benefit of Red Door Housing Society, as the payee, and is provided in consideration of Vancouver City Savings Credit Union agreeing to process debits against the Account (designated above) with my/our financial institution (or any other financial institution I/we may authorize at any time) in accordance with CPA rules.

I/we confirm that we have authority under the terms of my/our Account agreement to authorize this debit arrangement.

By signing this PAD Agreement, I/we acknowledge having received and read a copy of this PAD Agreement, including the terms contained herein; I/we acknowledge that I/we understand the terms of this PAD Agreement; and I/we agree to be bound by the terms of this PAD Agreement.

I/we authorize at any time in the Transaction Date period indicated above, for PADs to be drawn on my/our Account according to this PAD Agreement.

I/We warrant and guarantee that the person(s) whose signature(s) are required to sign on the Account have signed this PAD Agreement.

Confirmation and Pre-notifications: Red Door Housing Society will, at least 10 calendar days before the due date of the first PAD, provide me/us a confirmation in accordance with Rule H1.

For **fixed-amount, set interval PADs** (e.g., monthly PADs), Red Door Housing Society, will provide me/us with 10 days' prior written notice specifying the amount and date of the next PAD before any changes are made to the fixed amount PAD and of any change to the scheduled payment date(s), unless an exception under Rule H1 applies.

For **variable amount PADs**, after the first PAD, Red Door Housing Society will provide me/us with 10 days' prior written notice specifying the amount and date of the next PAD before the due date of the variable amount PAD, unless an exception under Rule H1 applies.

Cancellation of PAD Agreement: I/we acknowledge that I/we may revoke, change or cancel my/our authorization under this PAD Agreement at any time in writing to Red Door Housing Society. I/we understand and accept that this notification must be provided to Red Door Housing Society at the contact information indicated below at least 30 calendar days before the next debit is scheduled.

Upon providing a notice of cancellation or revocation of authority, Red Door Housing Society will cease issuing in accordance with Rule H1.

To obtain a sample cancellation form, or for more information about my/our right to cancel this PAD Agreement, I/we acknowledge that I/we can contact my/our financial institution or visit www.payments.ca.

Recourse/Reimbursement: I/we acknowledge that 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 debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.payments.ca.

4. Payee Contact Information:

Organization Name: Red Door Housing Society

Address: 33-2688 Blanche Street Vancouver, BC V5S 4R4

Email Address: accounting@reddoorhousing.ca

Phone Number: 604-431-9225 Fax Number: 604-431-9225

I/We understand and accept the terms of entering into this PAD Agreement and participating in this PAD plan.

Signature of Account Holder
(appropriate)

Signature of Joint Account Holder (if

Name (Please print)

Name (Please print)

Date

Date

Note: If only one (1) signature is required for the Payor Account, then only 1 Payor signature is required to sign this PAD Agreement. If two (2) or more signatures are required for the Payor Account, then both or all Payors must sign this PAD Agreement.

When the form is complete, submit to:

Red Door Housing Society
33-2688 Blanche Street
Address 33-2688 Blanche Street
Email: accounting@reddoorhousing.ca