

**BISHOP OF VICTORIA ACCOUNTS**

**Definitions**

In this Agreement: "I", "We", "Our", "My", "Me", "Payor" refers to the person signing this Agreement;

Pre-Authorized Debit ("PAD"): means a pre-authorized debit payment time in electronic form drawn pursuant to this agreement on my account at my Financial Institution ("FI").

**Operation**

I understand and undertake that:

- (a) This authorization is for the benefit of the **Bishop of Victoria** and my financial institution ("FI") where I have my account My FI agrees to process debits against my account in accordance with the rules of the Canadian Payment Association.
- (b) Giving this authorization to the **Bishop of Victoria** is the same as giving it to my FI;
- (c) My FI is not required to verify that the PAD conforms with my authorization;
- (d) My FI is not required to verify that the purpose of payment to which this PAD relates has been fulfilled;
- (e) Revoking this authorization does not terminate any contract between me and **Bishop of Victoria**. My authorization applies only to the method of payment and has no bearing otherwise on the contract;

**Cancellation**

I/We may revoke my/our authorization at any time, subject to providing notice of at least 10 days prior to next debit due date. I/We must advise the **Bishop of Victoria** in writing or by signing the cancellation area below. To obtain a sample cancellation form, or for more information on my right to cancel a PAD Agreement, I/We may contact my FI or visit [www.cdnpay.ca](http://www.cdnpay.ca).

I authorize the processing of a PAD through my account as detailed below (**USE DARK PEN**):

Name(s): \_\_\_\_\_

Name of **Financial Institution**: \_\_\_\_\_

Address of FI: \_\_\_\_\_ Phone: \_\_\_\_\_

MICR Field Information (attach a void cheque if possible):

Transit# (Branch)				

Route# (Bank)		

Account#											

Frequency: **Monthly: 5<sup>th</sup> of each month** starting on: \_\_\_\_\_

Amount: Fixed \$ \_\_\_\_\_

\_\_\_\_\_/100 Dollars

This PAD is for transfer to account#: **Saanich Peninsula Parish - 6644959 C5**

I understand and agree to the terms and conditions of this Agreement.

Date \_\_\_\_\_ Signature \_\_\_\_\_

<b>Authorization to Cancel PAD</b>
Signature _____
Date _____

Company Name: _____
Address: _____
Tel: _____
Fax: _____
Email: _____

**PAD AGREEMENT**

**The Account**

I confirm that:

- (a) all persons required to sign on my account with my FI have signed this agreement;
- (b) I certify that all of the personal and account information recorded in this Agreement is correct. I will inform the **Bishop of Victoria** in writing of any change to such Information at least 10 business days prior to the next due date of the PAD.

**Dispute and Reimbursement**

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 FI or visit [www.cdnpay.ca](http://www.cdnpay.ca).

I understand that:

- (a) I may dispute a PAD and may claim for reimbursement if:
  - (i) the PAD was not drawn in accordance with this Agreement; or
  - (ii) the Agreement was revoked; or
  - (iii) no Agreement exists between me and the purported payee.
- (b) If I am claiming reimbursement, I must, within 90 calendar days of the date of posting of a personal PAD or Funds Transfer PAD or 10 business days in the case of a Business PAD, complete a declaration to my FI that I have a claim for one of the reasons given in the preceding paragraph.
- (c) In the case where the declared condition is "no Agreement exists between me and the purported Payee", I may claim reimbursement within 90 calendar days after the posting date on my account statement which shows the improperly processed debit.
- (d) Any claim relating to a PAD which is advanced after the expiry of the time in the preceding paragraph or any Funds Transfer PADs is strictly a matter between me and the **Bishop of Victoria**.