

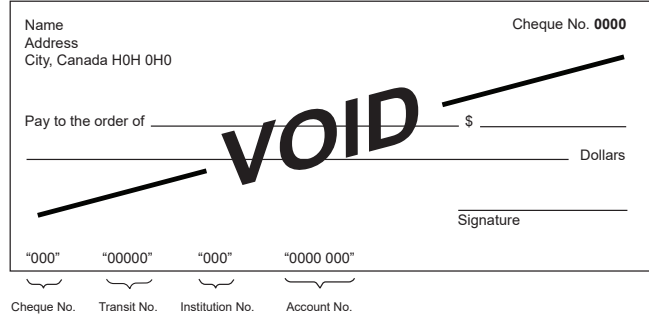
1. What would you like to do?	
<input type="checkbox"/> Start electronic funds transfer <input type="checkbox"/> Change electronic funds transfer information <input type="checkbox"/> Stop electronic funds transfer	Effective Date (DD/MM/YYYY)
2. Provide your contact information	
Name	
Phone:	Cell Phone:
Email Address	

3. Give your banking information

This section is not required if you are stopping electronic funds transfer.

OPTION 1

Please attach a personalized blank cheque with your bank information on it. Write void across the front.



OPTION 2

If you do not have a blank cheque, have your bank complete the following:

Name of bank: _____

Branch address: _____

Transit No.: _____ Institution No.: _____

Account No.: _____

Phone number: () _____

Authorized representative name: _____

Authorized representative signature: _____

4. Authorize electronic payment

I authorize the Province of Nova Scotia to start, change, or stop the withdrawal or deposit, by electronic funds transfer, of payments to or from Municipal Affairs and Housing and, if necessary, to adjust for amounts withdrawn or deposited electronically in error. The Province will withdraw or deposit the payments using the banking account designated above.

Signature: _____

Date (DD/MM/YYYY): _____

Financial Institution Stamp:

5. Return completed form and void personalized cheque (if applicable) to your local office.

Questions? Call your local housing office

FOR OFFICE USE ONLY			
Person/Organization ID	Date Entered (DD/MM/YYYY)	Collector Name	Collector Signature