

**RENT PRE-AUTHORIZED DEBIT AGREEMENT** (Payors PAD Agreement)

**Resident to be debited** (payor)

Name: \_\_\_\_\_

Building : \_\_\_\_\_ Unit Number : \_\_\_\_\_

Phone Number: \_\_\_\_\_

Name of Financial Institution you want debited : \_\_\_\_\_

Address of Financial Institution you want debited: \_\_\_\_\_

Name(s) of account holder(s): \_\_\_\_\_

**Account Information**

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Route

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Transit

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Account

Please also attach voided cheque

 Amount: \_\_\_\_\_ Timing: First of each month First due date: \_\_\_\_\_

(to be adjusted to amount agreed to on lease renewals)

**Authorization:**

I/We acknowledge that this Authorization is provided for the benefit of Houston Properties (the Payee) and the Processing Institution and is provided in consideration of the Processing Institution agreeing to process debits "PADs" against the Account with the Processing Institution in accordance with Rules of the Canadian Payments Association (the CPA Rules). By signing this authorization, the Payor acknowledges having received and read a copy of this Agreement, acknowledges the understanding the terms and conditions of this agreement, and agrees to be bound by the terms and conditions of this agreement. I/We warrant and guarantee that the person(s) whose signature(s) are required to sign on the Account have signed the Authorization. I will provide Houston Properties with written notice to cancel or suspend payment before the 20th of the month preceding the payment.

 \_\_\_\_\_  
 Signature of Payor

 \_\_\_\_\_  
 Date

 \_\_\_\_\_  
 Signature of Payor

 \_\_\_\_\_  
 Date