



**PRE-AUTHORIZED PAYMENT (PAP) AUTHORIZATION FORM**

Please enter your form online at: [forms.magnumyork.com/pap](https://forms.magnumyork.com/pap)  
Or, email this completed form and a void cheque (or a picture of a void cheque) to [forms@magnumyork.com](mailto:forms@magnumyork.com) or mail to our office.

The information provided on this form is collected under the authority of the Personal Information Protection Act, part 2, section 3(11) and will be used to set up pre-authorized payments. Any questions about the collection of this information may be directed to the Property Manager.

**Contact Information** (please print)

<b>Full Name:</b>		<b>Phone No.:</b>	
<b>Address</b>	<b>City</b>	<b>Province</b>	<b>Postal Code</b>

**Please attach a "VOID" cheque or personalized deposit slip.**

**If you are using a "non-chequing" account, contact your bank for the necessary account information.**

**I / WE HEREBY AUTHORIZE MAGNUM YORK PROPERTY MANAGEMENT LTD. TO DEBIT MY / OUR ACCOUNT INDICATED ABOVE EACH MONTH FOR ALL PAYMENTS PAYABLE TO:**

**NAME OF BUILDING / CORPORATION (if applicable):**

Unit #: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

*\*Please note your building number is listed first - for internal use)*

Your treatment of each payment shall be the same as if I/we have personally issued a cheque authorizing you to pay as indicated and to debit the amount specified to my/our account. I/we will advise of ANY CHANGES including bank account or address change, at least 7 business days prior to the end of the month.

TO CANCEL PLAN: Authorization is to remain in effect until canceled by either myself or MAGNUM YORK PROPERTY MANAGEMENT LTD. by written notification. It is **your** responsibility to inform us in **writing** to stop pre-authorized payments.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**For a joint account, all depositors must sign if more than one signature is required on cheques issued against the account.**