**PRE-AUTHORIZED DEBIT AGREEMENT**

**Instructions**

**Please complete and return with a pre-printed, personalized void cheque or a pre-authorized debit form that has been stamped by the issuing financial institution. All borrowers and account holders must sign this form.**

Note: Account must be a personal chequing account. Line of credit and/or savings accounts, as well as business or corporate accounts are not acceptable. Any form of pre-authorized debit form or void cheque that has been printed from an online source must be stamped by the bank branch.

**Agreement Details**

We authorize CMLS Financial Ltd. (CMLS Financial) to debit the bank account indicated below for regular recurring payments and for one time payments from time to time owing on the mortgage. Regular recurring payments will be debited to our bank account in accordance with the payment frequency indicated on the mortgage commitment, or any payment frequency subsequently authorized by CMLS Financial. The entry on our bank statement will represent our receipt.

We acknowledge that regular recurring payments may vary from time to time due to changes in tax components, premiums (if applicable), interest adjustments, fees, arrears or, if the mortgage has a variable interest rate, due to fluctuations in the interest rate. **We hereby waive the requirement for CMLS Financial to provide written notice of the amount and date of** **the first or any other debit before it is processed.** Where a pre-authorized debit has been dishonored by the financial institution for any reason, we agree that CMLS Financial may represent the dishonored pre-authorized debit, or draw a pre-authorized debit in place of the dishonored pre-authorized debit. We are aware that a NSF fee will apply to any and all dishonored pre-authorized debits.

If there is a change in the bank or the account numbers from which the mortgage payments are to be drawn, a new personalized cheque marked “VOID” will be required for CMLS Financial to debit the new account.

We have certain recourse rights if any debit does not comply with this agreement. We have the right to receive reimbursement for any debit that is not authorized or is not consistent with this agreement. To obtain more information on our recourse rights, we may contact our financial institution or visit the Canadian Payments Association at [www.cdnpay.ca](http://www.cdnpay.ca/).

We may revoke or cancel this agreement at any time by written notice to CMLS Financial at least 20 days prior to the next payment date. We may obtain a sample cancellation form or more information on my right to cancel a PAD agreement by consulting my financial institution or by visiting [www.cdnpay.ca](http://www.cdnpay.ca/).

CMLS Financial may cancel this agreement by sending us a 30-day notice. This agreement may also be cancelled without notice if the financial institution refuses the pre-authorized debits for any reason or we are in default of any of our obligations to CMLS Financial.

**Borrower Details & Banking Information**

Mortgage Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Borrower Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Bank Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Transit Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Borrower Authorization**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Joint Account Holder

Please attach void cheque or pre-authorized debit form.