



827 FISGARD STREET VICTORIA BC V8W 1R9 PHONE: 250-385-2131 | FAX 250-385-6776 www.pacificahousing.ca

PRE-AUTHORIZED PAYMENT FORM

Name(s):		Start Date:	Start Date:	
Α	ddress:			
Email:		Phone:	Phone:	
l	Please provide a VOID Cheque or a bank Direct De	eposit form for account verification.	form for acc	rification.
	PRE-AUTHORIZED RENT PAYMENT PROG	GRAM TERMS AND CONDITIONS	TERMS AND C	<u> 2NC</u>
I.	The resident's pre-authorized payment will be drawn from their rent, parking, and any other agreed upon payments.			
2.	Changes to the pre-authorized rent payment amount resulting automatically following the recalculation of the rent.			
3.	A service charge of \$25.00 will be charged for items returned use Sufficient Funds, Account Closed/Frozen, or Stop Payment.			
4.	All cancellations must be in writing or by email and must be sub of the month. Please email Accountsreceivable@pacificahousing			
5.	PADs will commence on the first (1st) of the following month at dated, unless otherwise stated here:			
6.	For joint accounts, all signatories to the account must sign form			
I/V	Ve hereby agree to abide by the terms and conditions as	s detailed in this document.	iled in this do	
D/	ATESIGNATURE			
DA	ATESIGNATURE			