



4829-50 STREET, UPPER LEVEL  
POSTAL DRAWER 640  
VEGREVILLE, AB T9C 1R7  
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**TAX INSTALMENT PAYMENT PROGRAM (T.I.P.P.)  
AUTHORIZATION FORM**

NAME: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

TAX ROLL# \_\_\_\_\_

ESTIMATED TAX LEVY: \_\_\_\_\_ T.I.P.P. MONTHLY PAYMENT: \_\_\_\_\_  
Estimated Tax Levy Divided by 12):

**I apply to enroll in the Town of Vegreville Tax Instalment Plan under the following terms and conditions:**

- Please attach copy of void cheque
- To debit my/our account as indicated above for all estimated property taxes payable to the Town of Vegreville on the:
  - 15<sup>th</sup> day of each month beginning \_\_\_\_\_ (MONTH)
  - Last day of each month beginning \_\_\_\_\_ (MONTH)
- The treatment of each payment shall be the same as if I/we had personally issued a cheque authorizing payments as indicated and to debit the amount specified to my/our account.
- Any returned payments will be subject to a service charge.
- This authorization may be cancelled at any time upon written notice by me/us.
- Any delivery of this authorization to you constitutes delivery by me/us.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Signature

**PLEASE NOTE:**

- For verification purposes please enclose a VOID cheque verifying the account payments are to be drawn from.
- For a joint account, all depositors must sign if more than one signature is required on cheques issued against the account.
- In the event of a sale of the above noted property, or a change in bank accounts, it is your responsibility to immediately notify the Taxation Department at the Town Office to arrange for cancellation or transfer of the Plan.