



Town of Ponoka
200 5604 50 Street
Ponoka, Alberta T4J 1G5
Tax: 403-783-0127
Fax: 403-783-0115
www.ponoka.ca
taxes@ponoka.ca

**TAX INSTALLMENT PAYMENT PLAN (TIPP)
APPLICATION FORM**
(Personal Pre-Authorized Debit Agreement)

APPLICANTS PERSONAL INFORMATION

Tax Roll Number: _____

Last Name: _____

First Name: _____

Business Name (If applicable): _____

Property Address: _____

Mailing Address: Same as above or _____

Phone Number Home: _____

Cell: _____

Work: _____

Email Address: _____

APPLICANTS BANKING INFORMATION

Attach cheque marked "VOID" here or attach form
Completed by your financial institution

PAYMENT INFORMATION (To be completed by Town of Ponoka)

Annual Tax Levy Year _____ Amount \$ _____

Tax Levy divided by 12 months \$ _____

Initial Payment Required \$ _____ (____ months)

Monthly Payment \$ _____

Payment Start Date _____

Date Received _____ Received by (initials) _____



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TERMS AND CONDITIONS

-) Tax accounts must be current prior to the initiation of the Tax Installment Payment Plan
-) The plan runs from January to December of each year and continues each year unless cancelled by written notification. It is the **responsibility of the applicant** to advise the Town of Ponoka by the 20th of every month, of any changes required in that month (ie account information, sale of property or cancellation of plan)
-) Monthly payments are fixed for the months January through June and July to December payment amounts will automatically be adjusted in accordance with any change in the municipal tax levy
-) Payments are withdrawn from the account on the first banking day of every month. Any payments that are dishonoured by reason of non-sufficient funds, stop payment, account closure etc will be subject to an NSF fee of \$25.00 and the account will be removed from the plan without prior notice. All outstanding amounts become due and payable and subject to penalties.
-) Please note that December payment amount may vary if payments are returned or added fees are transferred (ie outstanding utilities) during the year. Account must have a zero balance at December 31.

I have read and understand the terms and conditions of the Tax Installment Payment Plan (TIPP) as stated above. I acknowledge that the information provided on this form is complete and correct.

SIGNATURE

DATE

FOIP Notification: The personal information you provide on this form is being collected under the authority of the Freedom of Information and Protection of Privacy Act and is used solely for the purposes relating to the administration of Assessment/Taxation services. Questions about the collection or use of this information can be directed to the Town of Ponoka at 403-783-0130