



## Pre-authorized Debit (PAD) Agreement

### 1. Payor Information (Please print clearly)

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

### 2. Bank Account Information

Payor Account Number:

Debit Amount: \$ \_\_\_\_\_ **Please indicate if you require any amount over the monthly union dues. ie. (\$502.00 for initiation)**

Branch Transit Number:

Financial Institution Number:        Chequing  Savings

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

Branch Address \_\_\_\_\_

Transaction Date: From: \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy

To: **Please contact the Union when you wish to cancel**

Please attach a void cheque.

### 3. Payee Information (Office only)

Construction & Specialized Workers Union Local 1611

Account #:                      Branch Number: \_\_\_\_\_



**Construction & Specialized Workers Union Local 1611**  
**#200 - 19092 – 26<sup>th</sup> Avenue, Surrey, B.C. V3Z 3V7**

#### 4. Pre-Authorized Debit (PAD) Details

I/We authorize Construction & Specialized Workers Union Local 1611 and the financial institution designated (or any other financial institution I/We may authorize at any time) to begin deductions as per my/our instructions for monthly regular recurring payments and/or one-time payments from time to time, for payment of all charges arising under my/our Construction & Specialized Workers Union Local 1611 account(s). Regular monthly payments for the full amount of services delivered will be debited to my/our specified account on the 5th day of each month. These services are for union dues.

These services are for (check one)  personal or  business purposes.

Construction & Specialized Workers Union Local 1611 will obtain my/our authorization for any other one-time or sporadic debits and provide me with 10 calendar days written notice prior to any debits. This authority is to remain in effect until Construction & Specialized Workers Union Local 1611 has received written notification from me/us of its change or termination. This notification must be received at least thirty 30 calendar days before the next debit is scheduled at the address provided below. I/We may obtain a sample cancellation form, or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting [www.cdnpay.ca](http://www.cdnpay.ca).

In the case of variable amount PADs, Construction & Specialized Workers Union Local 1611 will provide 10 days written notice prior to any changes in the fees and/or its schedule.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)

I/We understand and accept the terms of participating in this PAD plan.

\_\_\_\_\_  
Signature of Account Holder

\_\_\_\_\_  
Signature of Joint Account Holder (if appropriate)

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**When the form is complete, submit to:**  
**Construction & Specialized Workers Union Local 1611**  
**#200 - 19092 – 26<sup>th</sup> Avenue, Surrey, BC V3Z 3V7**  
**Fax: 604-538-0252**  
**Email: [info@cswu1611.org](mailto:info@cswu1611.org)**  
**Phone: 604 541-1611 or 1 800 663-6588**

