

TIPP Terms and Conditions

By signing this agreement, I agree to abide by the Terms and Conditions of the Pre-Authorized Debit and Electronic Funds Transfer Service provided by the City of Medicine Hat's Financial Institution.

This application states that I authorize the City of Medicine Hat and its financial institution to debit my bank account as per the following:

- for all taxes payable to the City of Medicine Hat for this property tax account,
- in the amount of the monthly payments noted, on the first day of each month beginning on the date indicated, and,
- which amount may increase/decrease pursuant to the provisions of the Tax Instalment Payment Plan Bylaw.

Nothing in this application shall be interpreted to relieve the owner/applicant from the obligation to pay any taxes, including penalties, owing to the City of Medicine Hat in the manner or on the date(s) for payment established by bylaw of the City of Medicine Hat.

Submitting Application: Any delivery of this application to the City of Medicine Hat constitutes delivery by me. TIPP applications can only be accepted prior to the tax due date of that year.

Annual Amount: The annual amount is the levy for January 1 to December 31 of the current year. If the application is received prior to the current year levy being applied, the annual amount will be based on the previous year's annual levy.

Initial Payment and Late Filing Fee: The payment plan divides the annual amount equally per month. When an application is received after January 1, the initial payment will include the total of all missed monthly payments from that year, plus a late filing fee of 2% of that total.

TIPP Correspondence: I am aware that all correspondence related to this TIPP will only be sent to the registered property owner(s).

Bank Account Information: have supplied a VOID cheque or pre-authorized bank account information for the preauthorized debit amounts stated. I am an authorized holder of the bank account provided.

Bank Account Changes: If I change my bank account, I will provide new bank account information to the City of Medicine Hat not less than 14 days prior to the next due date.

Returned/Dishonored Payments: I acknowledge that in the event any payment is not honored, penalties will be applied and my participation in the TIPP may be cancelled, in accordance with the provisions of the TIPP Bylaw.

Sale of Property: will provide written notice to the City of Medicine Hat not less than 14 days prior to the next due date to arrange cancellation of my payment(s).

Cancellation: I can cancel this Tax Instalment Payment Plan with written notice, no less than 14 days prior to the next due date. Withdrawal from TIPP shall be subject to the provisions of the TIPP Bylaw.