

### TENANT INFORMATION

NAME(S)	
RENTAL PROPERTY ADDRESS	CITY, PROVINCE & POSTAL CODE
EMAIL ADDRESS	PHONE NUMBER

### BANK ACCOUNT INFORMATION

FINANCIAL INSTITUTION NAME	
BRANCH ADDRESS/CITY/PROVINCE/POSTAL CODE	
BANK NUMBER (3 DIGITS)	TRANSIT NUMBER (5 DIGITS)
ACCOUNT NUMBER	

CHEQUING ACCOUNT OR  SAVINGS ACCOUNT

**PLEASE INCLUDE A VOID CHEQUE**

#### PRE AUTHORIZED DEBIT DETAILS:

1. I/We hereby authorize Bodewell Realty Inc., on behalf of the owner of the above-noted rental property, to debit the bank account identified above for the following:
  - A.Regular, recurring monthly rent payments on the 1st day of each month; and/or
  - B.One-time payments from time to time, for charges/debits arising under my/our Tenancy Agreement.

The first Pre-Authorized Debit (PAD) beginning on: \_\_\_\_\_

2. Bodewell Realty Inc. will obtain my/our authorization for any other one-time or sporadic debits

including but not limited to: move-in or move-out fees, NSF & late fees, strata fines and rental increases.

3. I/We acknowledge that:

- A. If this PAD is used for payment under a residential tenancy, it is a Personal PAD; and
- B. If this PAD is used for payment under a commercial tenancy, it is a Business PAD.

4. In the event of non-sufficient funds, I/We authorize Bodewell Realty Inc. and its financial institution to make a second deduction within ten (10) business days after the initial failed payment. All further deductions will include any late and non-sufficient fund fees.

5. I/We will inform Bodewell Realty Inc., in writing, of any change in the information provided in this section of the Authorization at least ten (10) business days before the next due date of the PAD.

6. This authority is to remain in effect until Bodewell Realty Inc. has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled. 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)

7. Bodewell Realty Inc. may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least ten (10) days prior written notice to me/us.

8. 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)

9. I/We shall be solely responsible for the accuracy and completeness of all information furnished to Bodewell Realty Inc. Bodewell Realty Inc. shall not be responsible in any way for errors resulting from the inaccuracy or incompleteness of any information furnished to Bodewell Realty Inc. from me/us.

10. Any notice which may be given pursuant to this Pre-Authorized Debit Agreement will be in writing and delivered, sent by email or other electronic means or sent by postage prepaid mail and addressed as follows:

To Me/Us:

at the above-noted Email Address or Rental Property Address

To Bodewell Realty Inc:

110 - 736 Granville St., Vancouver, BC V6Z 1G3 [info@bodewell.ca](mailto:info@bodewell.ca)

\_\_\_\_\_  
NAME(S) OF ACCOUNT HOLDER(S)

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
AUTHORIZED SIGNATURE

\_\_\_\_\_  
DATE