

Bylaw 2020-12 - Schedule A
TOWN OF CROSSFIELD
TAX INSTALMENT PAYMENT PLAN APPLICATION

PLEASE PRINT

Tax Roll No:	Civic Address:
Applicant(s) Name:	
Applicant(s) Mailing Address:	
Phone No:	Alternate No:
Email Address:	

I/We the applicant(s):

- authorize the tax collector to access my account for the monthly tax instalment payment payable to the Town of Crossfield on the 1st day of each month as payment in part of the taxes for the above-named property.
- those who wish to be included in the TIPP program may apply to the tax collector for inclusion provided that, at of the date of application, the following can be met:
 - a. Taxpayer does not owe taxes from any previous year pertaining to the property which is the subject of the application.
 - b. Taxpayer does not currently pay taxes through a mortgage company (P.I.T. – principal, interest, taxes)
- Acknowledge that under the TIPP program, we shall not be subject to the provisions of the town's most recent property tax bylaw relating to the due date for the payment of taxes, nor to the town's most recent penalties for unpaid taxes bylaw on taxes remaining unpaid.
- Agree that the TIPP instalments for the current year's Taxes will be collected from January to December of the current year, with the tax account balance to be paid in full by the December instalment.
- Agree that the most recent annual tax levy is divided by 12 to establish a monthly payment amount.
- Agree all monthly instalment payments are due on the first day of each month and shall be paid by automatic bank withdrawal from a savings or chequing account at a bank designated by the taxpayer.
- Acknowledge monthly payment amounts will be adjusted in July to compensate for changes in taxes resulting from the annual tax levy.
- Acknowledge that our annual tax notice, usually issued in June each year, will show the total amount of instalments paid to date and the calculation of the monthly instalment payment for the remaining payments in that year.
- Acknowledge that if for any reason the taxpayer needs to change or cancel the TIPP, the taxpayer must send written notice to the Town Office a minimum of ten (10) working days prior to the next instalment payment.

- Acknowledge that the tax collector may remove a taxpayer from the TIPP program in the event the taxpayer fails to make payment of each tax instalment on the due date as required for each instalment. If two consecutive payments are missed, the tax collector shall cancel the agreement upon default and all unpaid taxes become due and payable and are subject to penalties in accordance with the town's more current taxation bylaw.
- Agree that if any taxpayer payments are not honoured by their bank, the tax collector shall charge a service charge as noted in the town's most recent Fees and Rates bylaw.
- Acknowledge that when a taxpayer is removed from the TIPP program by the tax collector, subsequent to the due date for the payment of taxes as specified in the town's annual property tax bylaw, all unpaid property taxes become immediately due and payable and the provisions of the town's penalties on unpaid taxes bylaw apply immediately to all unpaid taxes.
- Acknowledge that in the event a taxpayer requests removal from the TIPP program, all taxes due and owing shall then become due and owing on the due date for the payment of taxes as specified in the town's annual property tax bylaw and the provisions of the town's penalties on unpaid taxes bylaw apply to all unpaid taxes due and owing to the tax collector after the due date.

AUTHORIZATION	
Authorized Signature:	Date Signed (MM/DD/YYYY)
**Authorized Signature:	Date Signed (MM/DD/YYYY)
<p><small>** For joint accounts where more than one signature is required on cheques, both are required.</small></p> <p>TERMS AND CONDITIONS: See Attached Page and refer to most recent Payment Option Bylaw</p>	

T.I.P.P. CALCULATION

Current Levy \$ _____ ÷ 12 months = Amount of Monthly Instalment Payment \$ _____

Please attach a VOID cheque of bank draft or complete the banking information below.

Your Name _____ Your Address _____ Pay to the Order of _____ \$ _____ _____ /100 Dollars	Date _____ Signature _____ Bank Name _____ Bank Address _____ Note _____
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Sample Cheque

Name of Financial Institution	
A. This is the cheque number (do not enter this number)	
B. This is the transit/branch number (5-digit number)	
C. This is the institution number (3-digit number)	
D. This is the account number. Please include any spaces that appear.	

This Tax Instalment Payment Plan agreement may be amended by the tax collector from time to time.