

Canadian & U.S. Dollar MasterCard®* for Business Pre-Authorized Debit Plan Authorization



Please ensure all fields are completed in full. If any information is missing, we will not be able to process the Pre-Authorized Debit (PAD) request. **This PAD will take effect on your next payment due date provided that we receive the completed form at least 10 business days before the next payment due date.**

1. Please read the Terms and Conditions and complete all the sections below to instruct your Financial Institution to make payments directly from your deposit account. U.S. Dollar PADs must be from a BMO Bank of Montreal U.S. Dollar deposit account.
2. Sign and return this authorization to BMO Bank of Montreal with a blank cheque marked "VOID" or the top portion of your deposit account statement. Use separate forms if you require both Canadian Dollar and U.S. Dollar PADs.

Mail to: Montreal P&C Product Operations **OR** **Fax to:** Montreal Client Contact Support:
 MasterCard Client Contact Support Toll Free 1-866-859-2088
 CP 11064, Succursale Centre-Ville
 Montreal, QC H3C 5A2

3. Retain the Terms and Conditions for your records.

I/We authorize BMO Bank of Montreal to debit the deposit Account shown below in accordance with the BMO MasterCard for Business Pre-Authorized Debit Plan Terms and Conditions

BMO MasterCard for Business Account Type (Use separate forms if you require both Canadian Dollar and U.S. Dollar PADs)

Canadian Dollar **OR** U.S. Dollar

Business Name

Owner Account Number

Set up PAD Plan Authorization (select one only)

- All MasterCard accounts under this business name, including new accounts added after this date
- The following MasterCard accounts:

MasterCard Account #:

Financial Institution Name		Account No.	Transit No.
Address			Suite/Unit
City	Province	Postal Code	Country
Amount to be debited: <input type="checkbox"/> Minimum Monthly Payment OR <input type="checkbox"/> Payment in Full <small>If the payment due date falls on a weekend or on a holiday, then the payment will be processed and considered made on time the next business day. Please ensure funds are available in your account, otherwise non-sufficient funds charges may apply.</small>			

Signature(s) on behalf of the Account Holder(s) OR Signature(s) of the Account Holder(s) (If joint Account, both Account Holders must sign)

Name of Deposit Account holder	Signature X	Date
Name of Deposit Account holder	Signature X	Date

Detach and retain

BMO MasterCard for Business Pre-Authorized Debit Plan Terms and Conditions

These terms and conditions form part of the BMO MasterCard for Business Pre-Authorized Debit Authorization (the "Authorization" or "PAD Agreement"). In these terms and conditions, "Account" means the deposit account shown in an Authorization, "Bank" means Bank of Montreal, "Financial Institution" means the financial institution where we have the Account, as shown on the Authorization, and "We" means the Account holder(s) shown on the Authorization.

1. We warrant the Bank to debit the Account for either the minimum monthly payment or the full monthly balance due on the BMO MasterCard for Business account shown on the Authorization. Debits will occur on the payment due date shown on each monthly statement.
2. We warrant and guarantee that all persons whose signatures are required to draw cheques on the Account have signed the Authorization.
3. We will notify the Bank in writing of any changes to the Account information at least thirty (30) days prior to a payment due date.
4. Either party may terminate the Authorization by notifying the other in writing at least thirty (30) days before a payment due date.
5. We understand that the Financial Institution is not required to verify that the Bank has drawn any debit in accordance with the Authorization.
6. We may dispute a debit within ten (10) business days after the debit is posted to the Account by providing a signed declaration to the Financial Institution that the debit was not drawn in accordance with, the Authorization or that the Authorization had been revoked. We will deal directly with the Bank in connection with any debits that we wish to dispute after that ten (10) business-day period.
7. We have certain recourse rights if any debit does not comply with this agreement. For example, we have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on our recourse rights, we may contact our financial institution or visit www.cdnpcy.ca. We may also contact any branch of the Bank of Montreal or the Client Services Department (see contact information below).
8. Upon the termination of our BMO MasterCard for Business Account Agreement with the Bank, we request also the cancellation of this Authorization upon the full payment of balance owed on the MasterCard Account.

Send written notification to the following address/fax for any changes to the Account information or to terminate the Authorization:

By Mail: Montreal P&C Product Operations, MasterCard Client Contact Support, CP 11064, Succursale Centre-Ville, Montreal, QC H3C 5A2
By Fax: Montreal Client Contact Support
 Toll Free 1-866-859-2088

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