



Southport
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PRE-AUTHORIZED DEBIT PLAN — RESIDENTIAL

Applicant # 1 & 2

1. Last Name:	First Name and Initial:	
2. Last Name:	First Name and Initial:	
Street Address:	Mailing Address:	
Town/City:	Postal Code:	Email:
Telephone (home):	Telephone (business):	Cell:

Financial Institution

Name of Financial Institution:		
Address:		
Town/City:	Postal Code:	Telephone:

Details

I/We have attached a blank cheque marked VOID to this form/or included account number print out from financial institute. I/We hereby authorize Southport Aerospace Centre Inc. to automatically debit my bank account for the monthly rent and miscellaneous billing arising under my lease. Payment for rent will be processed on the 1st day of every month and miscellaneous charges will be processed on the 1st day of the following month. I/We will inform Southport Aerospace Centre Inc., in writing, of any change in the information provided or cancellation of this authorization. I/We understand and accept the terms of the above authorization agreement. Type of service: business personal

This authority is to remain in effect until Southport Aerospace Centre 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 at the address provided. I/We may obtain a sample cancellation form, or more information on y/our right to cancel at PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca.

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 institute or www.cdnpay.ca.

Signature: _____

Date: _____

Signature: _____

Date: _____

PRIVACY POLICY: Southport Aerospace Centre Inc. (Southport) must collect certain personal information in order to process your Residential application form. Southport only collects that information required in order to process your application for residential housing, including your previous address, character references, employer and income information, credit references, the names of all occupants to be resident in the premises, and an emergency contact. The personal information provided to Southport will only be used for the purposes for which it was collected, and will only be disclosed with your consent, or where permitted or required to do so by law. A complete copy of Southport's Privacy Policy is available upon request, or on our website at www.southport.ca.

Office Use Only

Copy to tenant <input type="checkbox"/>	Occupancy Date:	PAD Start Date:	Rent: \$
A/R entered into MRI <input type="checkbox"/>	Original to A/R <input type="checkbox"/>	Copy to PMC <input type="checkbox"/>	