

Enroll in the EnerCare Solutions Pre-Authorized Payment Plan for Rental Water Heater Equipment

Benefits to You

Pre-authorized Payment is a simple, convenient, no-fee method of paying your bill. Your bill is always paid on time and the required amount is automatically debited from the bank account or credit card of your choice.

Paying Your Bill Effortlessly

- No more cheques
- No more envelopes to mail
- No more waiting in lines
- No more late fees

Enroll Today – in 2 Easy Steps

1. All you need is a valid credit card, chequing or savings account in Canadian funds at a Canadian bank or trust company.
2. Complete the attached application in full and mail it along with a copy of a void cheque to the address provided below.

Questions

Please visit www.cdnpay.ca for more information regarding your rights and responsibilities when paying your bills using the Pre-authorized Payment Plan or contact us:

EnerCare Solutions
P.O. Box 4645, Stn. A
Toronto, Ontario, M5W 7A3
Email: rentalinfo@enercare.ca
Phone: 1-866-421-9025

Terms of Agreement

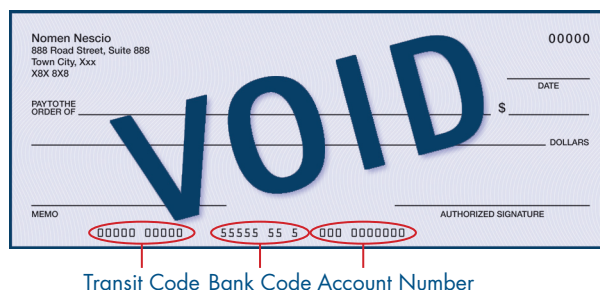
I authorize EnerCare Solutions Limited Partnership (“EnerCare Solutions”), a wholly-owned subsidiary of EnerCare Solutions Inc., and its successors and assigns, to debit my account at the financial institution or charge my credit card to pay for regular bi-monthly recurring payments at the prevailing rate and/or one-time payments from time to time, for payment of all charges arising under my account.

EnerCare Solutions will provide written notice of the amount of each regular debit. This authority is to remain in effect until EnerCare Solutions has received written notification from me of its change or termination.

I have certain recourse rights if any debit does not comply with this Agreement. For example, I have the right to receive reimbursement for any Pre-authorized Payment (PAP) that is not authorized or is not consistent with this PAP Agreement. To obtain a Reimbursement Claim form, or for more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.

This authorization may be cancelled at any time with at least 30 days prior written notice to EnerCare Solutions at the address provided. Cancellation of this authorization applies only to the method of payment and does not otherwise have any bearing on the contract for EnerCare Solutions’ goods and services.

I understand that EnerCare Solutions may charge an administration fee for any NSF incurred.



Please do not forget to include a void cheque.

Please complete the authorization form below and return with a void cheque to:

EnerCare Solutions, P.O. Box 4645, Stn. A, Toronto, Ontario, M5W 7A3

Information: Please check one: Personal Account Business Account

First/Last Name or Company Name _____ Account# _____
Address _____ Apt/Unit _____
City/Town _____ Province _____ Postal Code _____
Home Phone _____ Business Phone _____
Cellular Phone _____ E-mail Address _____

Option 1: For Bank Account Payments

Name same as above

Account Holder First/Last Name (if different from above) _____

Account# _____ Financial Institution _____ Transit# _____ Bank# _____

Option 2: For Credit Card Payments

Name same as above

Credit Card Holder First/Last Name (if different from above) _____

Visa MasterCard Credit Card Number _____

CW Code _____ Expiry (mm-yy) _____ Financial Institution _____

Authorization Required

Account Holder Signature _____

Account Holder Signature _____

Date _____

I warrant that all persons whose signatures are required to sign on this account have signed this Agreement and agree to comply with the terms and conditions on the reverse. You, the payor, may revoke your authorization at any time in writing subject to providing EnerCare Solutions 30 days notice. To obtain a cancellation form, contact EnerCare Solutions, or for more information on your right to cancel your Agreement contact your financial institution or visit www.cdnpay.ca.

Please return this form along with a Voided Cheque to:
EnerCare Solutions, P.O. Box 4645, Stn. A, Toronto, Ontario, M5W 7A3

Please print this page and mail to the address listed above. Please allow time for processing.