



swan
DUST CONTROL
Mat & Mop Rental Service

1-800-265-6141
swandust.com

Pre-Authorized Debit (PAD) Agreement

1. Customer Information (please print clearly)

Name: _____ Swan Account #: _____
Street Address: _____
City: _____ Province: _____ Postal Code: _____
E-mail: _____

2. Bank Account Information

Please attach a void cheque, or complete the following:

Account Number: _____ Branch Transit Number: _____
Financial Institution Number: _____ Account Type: Chequing Account
 Savings Account
Financial Institution Name: _____
Branch Address: _____

3. Pre-Authorized Debit (PAD) Details

You, the Payor, authorize Swan Dust Control Ltd. to debit the bank account identified above for the full amount of services delivered, on the 20th of every month (or the next business day).

These services are for (check one): Business Use Personal

You, the Payor, may revoke your authorization at any time by providing at least five (5) days notice, in writing or via e-mail. To obtain a sample cancellation form, or for more information on your right to cancel a PAD Agreement, contact your financial institution or visit www.cdnpay.ca.

Signature of Account Holder: _____ Signature of Joint Account Holder (if applicable): _____

Name: _____ Name: _____
(Please Print) (Please Print)
Date: _____ Date: _____

You have certain recourse rights if any debit does not comply with this agreement. For example, you 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 your recourse rights, contact your financial institution or visit www.cdnpay.ca.

When the form is complete, mail, e-mail or fax to:

Swan Dust Control Ltd.
35 University Ave. E.
Waterloo, Ontario N2J 2V9
Fax: (519) 746-3161
E-mail: receivables@swandust.com