



**City of Port Colborne  
Pre-Authorized Banking  
Information Change  
Tax or Water**

City of Port Colborne  
Finance Division  
66 Charlotte Street  
Port Colborne, ON L3K 3C8  
905-835-2900

**This is to notify the City of Port Colborne that I/we wish to change my/our account information for pre-authorized payments for: (please indicate with X)**

**TAX**

**WATER**

Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Property/Service Address: \_\_\_\_\_

Tax Roll#/Water Acct# \_\_\_\_\_

Financial Institution: \_\_\_\_\_

Branch Address: \_\_\_\_\_

Branch #: \_\_\_\_\_ Branch ID #: \_\_\_\_\_ Account #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(By placing a signature on this agreement the taxpayer acknowledges that he or she has read, understood and agreed to all the terms of this authorization. For a joint account, all depositors must sign if more than one signature is required on cheques.)

**\*\*\*PLEASE ATTACH A VOID CHEQUE OR FINANCIAL BANKING INFORMATION SHEET\*\*\*  
(TO THE BACK OF THIS PAGE)**

The City of Port Colborne is committed to protecting the privacy of water/wastewater and property tax customers and developing technology that provides a safe online experience. To see the City of Port Colborne Privacy Policy, please visit [www.portcolborne.ca](http://www.portcolborne.ca)

Please save this document and email the completed form to [customerservice@portcolborne.ca](mailto:customerservice@portcolborne.ca)