

the account.

⊕ hnhousing.ca♀ 25 Kent Street N. Unit 2 Simcoe, ON N3Y 3S1⋈ hnhc@hnhousing.ca

**1-800-265-2819** 

## **Automatic Withdrawal Application**

Tenant Name	Address	Phone #	
·		its. If you choose this option your rent will be wall aldimand Norfolk Housing Corporation.	ithdrawn from
Please sign here to autho on the 1 <sup>st</sup> day of every me		sing Corporation to withdraw your rent from yo	ur bank account
Authorized Signature(s):		·	
Date:		_	
Note: For joint accounts,	all depositors must sign when m	ore than one signature is required on a cheque	issued against

## Attach a VOID CHEQUE or a BANK PRINTOUT for Automatic Withdrawal

YOUR REQUEST WILL BE ACCEPTED ONLY IF ONE OF THE ABOVE IS PROVIDED

I agree to give Haldimand Norfolk Housing Corporation 2 weeks' notice if I change my mind and no longer want to have my rent automatically withdrawn from my bank account.