## DPM RENTAL MANAGEMENT LTD. PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

## **CUSTOMER INFORMATION** (Please print clearly)

Name(s):		
Mailing Address:		
City:	Province: Postal Code:	
Phone #:	e-mail:	
PRE-AUTHORIZED DEBIT (PAD) DEB	and the financial institution designated (or any other financial counties as per my/our instructions for monthly regular recurred DPM Rental Management Ltd. account(s). Regular montebited to my/our specified account on the 1st day of each material Management Ltd. has received written notification ived 15 days before the next debit is scheduled at the address or more information on my/our right to cancel a PAD Agreew.cdnpay.ca  The material Management Ltd. will provide 3 months written notice prior to be on behalf of: an Individual or a Business does not comply with this agreement. For example, I/we have does not consistent with this PAD Agreement. To obtain on my/our recourse rights, I/we may contact my/our final	ncial institution ring payments for thly nonth.  n from me/us of ess provided below. ement at o any changes  ave the right to receive ain a form for a
Signature of Account Holder	Signature of Joint Account Holder (if applicable)	
Name (Please print)	Name (Please print)	
Date	Date	

When the form is complete, mail, fax or e-mail to: DPM Rental Management Ltd.,
#300 - 1055 West 14th Street,
North Vancouver, BC, V7P 3P2
P (604) 982-7051 F (604) 924-5002
E-mail: jdennison@dpmonline.ca