

AUTHORIZATION FORM - PAGE 1



Please complete BOTH pages of the
Pre-Authorized Debit (PAD) / Pre-Authorized Direct Deposit Agreement
Below

- ELECTRIC BILLING**
- FIT PAYMENT**
- MICROFIT PAYMENT**

Please check one choice:

- EQUAL PAYMENT PLAN**
- PRE-AUTHORIZED CHEQUING
EQUAL PAYMENT PLAN**
- PRE-AUTHORIZED CHEQUING PLAN**
- DIRECT DEPOSIT with E-Billing (MicroFIT/Fit Only -
see www.npei.ca for My Account login information)**

CUSTOMER INFORMATION

Date	
Hydro Account #	
Name	
Email:	
Service Address	
City	Province
Postal Code	Phone #

BANKING INFORMATION

Financial Institution Name	
Branch Address	
Branch	
Transit #	Account #

ELECTRICITY GENERATION DIRECT DEPOSIT

I/We hereby authorize Niagara Peninsula Energy Inc. to deposit to my/our account indicated above for the purpose of payment of generation of electricity in accordance to FIT / Microfit contract. Regular monthly payments for the full payment due will be deposited to my/our specified account on the due date of the bill. Niagara Peninsula Energy Inc. will provide at least ten (10) days written notice of the amount of each regular deposit as specified by the bill.

Please complete the PAGE 2 also ►

AUTHORIZATION FORM - PAGE 2



Please complete BOTH pages of the
Pre-Authorized Debit (PAD) / Pre-Authorized Direct Deposit Agreement
Below

ELECTRICITY BILLING

I/We hereby authorize Niagara Peninsula Energy Inc. to debit my/our account indicated above for the purpose of paying electric bills. Regular monthly payments for the full amount due will be debited to my/our specified account on the due date of the bill. Niagara Peninsula Energy Inc. will provide at least ten (10) days written notice of the amount of each regular debit as specified by the bill.

This authority is to remain in effect until Niagara Peninsula Energy Inc. has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit / direct deposit is scheduled at the address provided below.

Niagara Peninsula Energy Inc. may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 days prior written notice to me/us.

I/We have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for any PAD that is not authorized or is not consistent with this PAD agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca

Date

Signature

Signature

For verification purposes if application of pre-authorized chequing plan or direct debit, please enclose one of your personal cheques marked "VOID". For a joint account, all depositors must sign if more than one signature is required on the cheques issued against the account. A signature is required for equal payment plan only option; however, no banking information is required.

Please mail or drop off at:
Niagara Peninsula Energy Inc.
7447 Pin Oak Drive, Box 120
Niagara Falls, Ontario L2E 6S9

Email: billing@npei.ca