



Approval for Pre-Authorized Debit from Bank Account

*** All sections must be completed ***

Completed forms can be returned to TransHelp at:
2 Copper Road, Brampton ON L6T 4W5,
by email at transhelpcontrolclerk@peelregion.ca
or Fax 905-277-5864

Section 1

PASSENGER INFORMATION

Passenger Name: _____ TransHelp Client ID #: _____

Tel/Cell #: _____ or email: _____

Section 2

I hereby pre-authorize the Region of Peel to withdraw from my/our bank account: (check only 1 option)

- Charge the above account for a **Monthly Pass (MPASS) \$124.00** on the 1st day of each calendar month (MPASS are most effective if using at least 16 return rides a month; amount not used will not be carried forward.)
- Charge \$_____ to be deposited into the above passenger TransHelp client account on the 1st day of each calendar month.

**** Please note that client accounts will continue to be charged unless TransHelp is otherwise notified ****

Section 3

Please include a **void cheque** with the completed document

Please note that TransHelp **will not** suspend, hold or carry over payments from one month to the next. A Client can choose to stop PAD payments at anytime. However, if a client wishes to re-start PAD payments, the client would be required to re-submit a new Pre-Authorized Debit form with updated details as well as a separate void cheque.

For Joint Account, all depositors whose signatures are required on cheques issued against the account must sign this authorization.

Signature #1: _____ Signature #2: _____ Date: _____

Please Note:

- Returned payments are subject to an NSF fee.
- Completed forms must be received by the 15th of the preceding month in order to process the information provided.
- Clients may call into the Customer Contact Centre to request payments via credit card.
- Please refer to User Guide or <https://www.peelregion.ca/transhlp/users-guide.htm> for additional information.