

## CIBC Quebec Student Loan Centre CIBC centre de prêts aux étudiants du Québec

P.O. Box 64, Station Place d'Armes Montreal, Quebec, H2Y 3E9

Tel:514-845-3037 Fax 514-845-3013

## **Personal Pre-Authorized Payment Agreement**

1. Customer Information (Please print clearly)		
First Name:Last Name:		
Street Address:	Apartment/Unit:	
City: Prov	ince:Postal Code:	
Telephone Number: ( )		
2. Personal Type Pre-Authorized Payment details (Please print clearly)		
Loan Number: You hereby authorize CIBC <b>Quebec Student Loan Center</b> to debit the bank account identified on this form, effective (insert month – all payments default to last day of month), in the amount of \$, to repay your student loan as stipulated on your Consolidated Student Loan Agreement. (Note: Subsequent payments will be withdrawn each month until the loan has been paid in full).		
3. Bank Account Information (Please print clearly and attach copy of your void cheque along with this agreement)		
Financial Institution Name:	inancial Institution Name:Branch Transit Number:	
Institution Code:	Account Number:_	
If the funds are to be withdrawn from	m a Third party's bank account, please complete s	ection below:
Account Holder:	Account Holder Signature:	Date:
Joint Account Holder:	Joint Account Holder Signature:	Date:
4. Borrower Authorization and Agreement		
You hereby waive the requirement for CIBC Quebec Student Loan Center to provide written notice to you of any change in the amount or date of any debit. For change of Payment date, please contact CIBC Quebec Student Loan Center.		
You, the Payor, may revoke your authorization at any time subject to providing verbal/written notice to the CIBC Quebec Student Loan Center at least 10 business days prior to your next scheduled Pre-Authorized Payment due date. To cancel this Pre-Authorized Payment Agreement, please contact CIBC Quebec Student Loan Center.		
You have certain recourse rights if any debit does not comply with this agreement. For example, you have the right to receive reimbursement for any debit that is not authorized or is not consistent with this Pre-Authorized Payment Agreement. To obtain more information, please contact your financial institution, visit the Canadian Payment Association at: <a href="https://www.cdnpay.ca">www.cdnpay.ca</a> or contact the CIBC Quebec Student Loan Center.		
When this agreement is completed, please sign, date, and mail or fax it as soon as possible to the above mentioned address. Furthermore, you are required to notify <b>CIBC Quebec Student Loan Center</b> immediately in writing of any changes with respect to the banking account against which it has designated Pre-Authorized Payment Agreement to be withdrawn.		
Borrower Signature:	Date:	