



## Platinum Club Membership Application Form Pre-Authorized Debit (PAD) Agreement

Thank you for joining Safari Plumbing's exclusive Platinum Club! We can't wait to welcome you!

You're well on your way to discovering **exclusive member benefits** like these:

- √ Free annual 100-point **annual plumbing inspection** and servicing
- √ **Front-of-the-line service:** guaranteed same-day appointments 365 days per year
- √ Full **10% discount** on ALL products and services
- √ ALL repairs/replacements **guaranteed** for up to three full years

Only <b>\$7.95</b> plus taxes per month!
---

### Sign me up!

Yes! I want to enjoy the savings and peace of mind of being a Platinum Club member!

### 1. Client Information (Please print clearly)

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

### 2. Bank Account Information

Deposit Account Number: \_\_\_\_\_ Branch Transit Number: \_\_\_\_\_  
Financial Institution Number: \_\_\_\_\_ Chequing Account: \_\_\_\_\_ Savings Account: \_\_\_\_\_  
Financial Institution: Name: \_\_\_\_\_  
Branch Address: \_\_\_\_\_

### 3. Pre-Authorized Debit (PAD) Details

I hereby authorize Safari Plumbing to debit the bank account identified above for \$7.95 plus taxes per month for a minimum of 12 months. I understand this fee will continue unless I provide written notice of cancellation. (Please allow up to two weeks for cancellation to take effect). To obtain a sample cancellation form, or for more information on your right to cancel a PAD Agreement, contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

\_\_\_\_\_  
Signature of Account Holder

\_\_\_\_\_  
Signature of Joint Account Holder (if applicable)

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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 PAD Agreement. To obtain more information on your recourse rights, contact your financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca).

### 4. Instructions

Please print a copy of this form, then complete all the fields, sign where indicated and mail the completed form to:

**Safari Plumbing Ltd.**  
1902 Robertson Rd Suite 202H  
Ottawa, ON K2H 5B8