CLEAR FORM

Rev. 07/20/2026

ONE-TIME ELECTRONIC FUND TRANSFER (EFT) FORM
430 Grey Street Community Bond

Date: _____ **Type of Service:** ☐ **Personal** ☐ **Business**

Name: _____

Address: _____
Street Address

_____ _____ _____
City Province Postal Code

Telephone Number: _____

Email Address: _____

Financial Institution - Please attach void cheque or direct deposit form

Account Number: _____
Institution Number (3 digits): _____
Branch Transit Number (5 digits): _____

Bank Name: _____

Bank Address: _____ City: _____ Province: _____ Postal Code: _____

Pre-Authorized One-time EFT Details

You, the Payor, authorize Spiritual Blessing Lighthouse Ministries to debit the bank account identified above (and on attached void cheque or DD Form) for payments noted below, within 5 business days of Authorization Date. NSF charges will apply if funds are not available. The One-time EFT Agreement will no longer be valid once the payment has been fulfilled. Any subsequent EFT(s) require a new One-time EFT Agreement.

Amount: _____

You, the Payor, may revoke your authorization at any time by completing Indwell's Pre-Authorized PAD Cancellation Form and submitting it via email, mail or fax, subject to providing notice of 30 business days.

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 a form for a Reimbursement Claim, or for more information on your recourse rights, you may contact your financial institution or visit www.cdnpay.ca

Signature of Account Holder: _____

Print Name: _____

Authorization Date: _____