## Pre-Authorized Debits (PAD) Agreement RCAP® Leasing Inc.

## Please complete the Pre-Authorized Debit (PAD) Plan agreement below.

I/We authorize RCAP Leasing Inc., and the financial institution designated herein (or any other financial institution I/we may authorize at any time) to begin deductions as per my/our instructions for monthly fixed or variable regular recurring payments and/or one-time payments from time to time, for payment of all charges under all my/our RCAP Leasing Inc. accounts and agreements. Regular fixed or variable monthly payments for the full amount of services delivered will be debited to my/our specified account on the terms contained in any agreement I/We enter into with RCAP Leasing Inc.

This authorization is to remain in effect until RCAP Leasing Inc. has received written notification from me/us of its change or termination. This notification must be received at the address provided below at least thirty (30) days before the next debit is scheduled. I/We may obtain a sample cancellation form, or more information on my/our rights to cancel a PAD Agreement at my/our financial institution or by visiting www.payments.ca.

I/We acknowledge that the present PAD Agreement applies solely to the method of payment between me/us and RCAP Leasing Inc. and that the PAD Agreement and any cancellation of that Agreement will not have any effect whatsoever with respect to any contract for goods and services between me/us and RCAP Leasing Inc. and will not terminate any other obligation that I/we may have with RCAP Leasing Inc.

RCAP Leasing Inc. may not assign this authorization without providing prior written notice to me/us of the full details of such assignment, including the identity and contact information of the assignee, in advance of any PAD being issued in the assignee's name.

I/We hereby waive the right to receive pre-notification of the amount of the PAD or any changes to said amount, including due to tax variations, insurance premiums and/or any additional charges, taxes, fees, fines and penalties owed by I/we under the terms of this Lease, and I/we agree that it does not require advance notice of the amount of PADs before the debit is processed.

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 debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my/our recourse rights, I/we may contact my/our financial institution or visit **www.payments.ca**.

Lessee and Lessor acknowledge that a facsimile of a signature shall be accepted as an original executions. PLEASE PRINT Lease Contract #: Lessee Name(s): Address: Postal Code: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ Phone Number: Bank Name: Branch No. (5 digits): Bank No. (3 digits) Account No. Bank Address: City:\_\_\_\_ Province: \_\_\_\_ Postal Code: \_\_\_\_ Authorized Cheque Signor(s): Date: Date: PAD Agreement for payments made for business purposes. Void cheque required. RL V12212023