

PRE-AUTHORIZED DEBIT FORM (PAD) FOR ELECTRICAL CONTRACTORS

1. Applicant's Information (Please Print Clearly) Name of Applicant: Company Name (if applicable):			
		Street Address:	
		City/Town:	Postal Code:
Email:			
Contact Phone No.:	Alternative Phone No.:		
2. Banking Information			
Please attach a void cheque or a cheque specimer	n from your bank.		
Note: Changes in your banking information will require a Please allow 5-10 business days for new banking info			
3. Pre-Authorization Debit Details			
	ed electrical wiring permit applications. Once a wiring permit notification including the amount owing. This amount will be debited after the email notification has been sent.		
These services are for (check one) Personal	Business		
4. Authorization			
By signing this form I authorize NB Power to debit the permit application fee(s).	e bank account listed above for the full amount of the electrical wiring		
Name: (Please Print)	Signature of Applicant:		
Date:			

Mail or fax the completed form to the following address:

NB Power, Attn: Electrical Wiring Permit Applications 515 King Street, 3rd. Floor, PO Box 2000, Station A, Fredericton, NB E3B 4X1

FAX: 506 458-4000