

**Snow Removal Financial Assistance
For Seniors & Physically Challenged Citizens
REIMBURSEMENT FORM
2020/2021 Winter Season November – April**



Throughout the winter months, use this **Reimbursement Form** to track dates and the cost of each service. **For each service occurrence, you must obtain a signature from your service provider and/or attach receipts. Sign, date** and return your **Reimbursement Form** as soon as you have paid out your maximum allowance. Incomplete forms will be returned.

IMPORTANT DATES

Your Application Form is due April 30, 2021.
Reimbursement Forms received after July 31, 2021 will not be processed.
Subsidy payments for this program will not commence until January 2021.

Name of Applicant:

Address: _____ **Postal Code:** _____

Email Address:

Track Costs below (attach additional pages if necessary)

<u>DATE OF SERVICE</u>	<u>COST INCURRED</u>	<u>SIGNATURE OF SERVICE PROVIDER</u>

APPLICANT, SIGN AND DATE:

I hereby certify the above information is correct.

Signature of Applicant

DD	MM	YYYY			

The personal information on this form is collected under authority of Section 8 of the Municipal Act, S.O. 2001, c.25. The information will only be used for the purpose of the administering the Snow Removal Financial Assistance Program. Questions about the collection of personal information should be directed to the Permits Supervisor, Williams Parkway Operations Centre – 1975 Williams Parkway, Brampton ON L6S 6E5 – Telephone: 905.874.2500.

Mail or drop off completed form & receipts at:
City of Brampton, Public Works
 1975 Williams Parkway, Brampton, ON L6S 6E5
 Fax: 905.874.2599
 Email a scanned copy to: roads@brampton.ca

You can also drop off form & receipts at:
Service Brampton – City Hall Kiosk
 2 Wellington Street West
 Brampton, ON L6Y 4R2

Inquiries:
905.874.2500 or 3-1-1

Ensure you keep a copy for your records

ELECTRONIC FUNDS TRANSFER

Electronic Funds Transfer (EFT) is the City of Brampton's preferred method of payment.

This ensures payments are directly deposited into your bank account the same day payment is scheduled.

It ensures a secure, convenient and quicker receipt of payments.

To sign up for Electronic Funds Transfer, please fill in the attached Direct Deposit form and return via email to accountspayable@brampton.ca.

If regular mail is preferred, mail to:

City of Brampton
2 Wellington Street W.
Brampton ON L6Y 4R2

Attention: Accounts Payable

Thank you

Accounts Payable
Corporation of the City of Brampton



ACCOUNTS PAYABLE DIRECT DEPOSIT SET-UP FORM (for Vendors)

STEP#1: VENDOR INFORMATION

Type of Request: 1st Time Set-up Update of Information

Company Name: _____

Street Address: _____

City: _____ Province: _____

Postal Code: _____ Phone #: ()

STEP#2: ACCOUNT INFORMATION

OPTION-A (VOID CHEQUE ATTACHED) - For your payment to be deposited to your account please staple a cheque to this form in this area and ensure the word VOID is written across the face of the cheque.

-- OR --

OPTION-B (WITHOUT A VOID CHEQUE) - For your payment to be deposited to your account please have your bank provide and authorize the following information:

Bank Name: _____

Bank Addr: _____

Transit #: _____ Bank #: _____ Account #: _____

Bank authorization of above account information: _____

STEP#3: REMITTANCE INFORMATION

Contact Phone #: () _____ - _____

Remittance Method: Email* Email Addr: _____

(choose one) Fax Fax #: _____

E.D.I. Remittance (Electronic Data Interchange)

None

** Please note: Email is not a secure form of communication and we cannot guarantee that your message will not be viewed by someone else. Confidential banking information will NOT be included on email remittance advice (see SAMPLE on reverse/next page).*

STEP#4: SIGNATURE & DATE

I authorize The Corporation of the City of Brampton to deposit my Accounts Payable payments to the bank and account and issue my remittance advice as indicated on this form.

Signature: _____ Date: _____

STEP#5: MAIL OR FAX THIS FORM

Mail this form to:
City of Brampton
ATTENTION: Accounts Payable Supervisor
2 Wellington Street West, 2nd Floor
Brampton, Ontario
L6Y 4R2
or e-mail to accountspayable@brampton.ca

The personal information on this form is collected under authority of the Municipal Act, SO 2001, c.25 and will be used for the purpose of providing Direct Deposit payments for City vendors. Questions about the collection of personal information should be directed to the Accounts Payable Supervisor, 2 Wellington Street West, 2nd Floor, Brampton, Ontario, L6Y 4R2, Tel: 905 874 2239

ACCOUNTS PAYABLE DIRECT DEPOSIT SET-UP FORM (for Vendors)

From: corporate.e-commerce@rbc.com
Sent: 2005/01/27 4:17 PM
To: JDOE@ABCCOMPANY.COM
Subject: Payment Receipt Advice

THE CORPORATION OF THE CITY OF BRAMPTON ABC COMPANY LIMITED

Payment Information

Payor: CITY OF BRAMPTON Effective Payment Date: January 30, 2005
 Payment Amount: \$ 700.00 CAD Payment Trace #: REV-000197

Direct Responses/Queries to:
 ap.remittance@brampton.ca

Sample Email Remittance Advice

Remittance Information

Reference Code	Reference Information	Date	Total Amount	Discount Taken	Amount Paid
Invoice Number Voucher	62255101 00325838	01/21/2004-Invoice	300.00	0.00	300.00
Invoice Number Voucher	40120187 00325839	01/13/2004-Invoice	400.00	0.00	400.00

This e-mail message is information only. Please do not reply.
 Queries are to be directed to the e-mail address provided in the payment information section above.