



# AUTO PAY PLAN

HAVE YOUR PAYMENTS AUTOMATICALLY  
PAID FROM YOUR CHECKING ACCOUNT OR  
CHARGED TO YOUR CREDIT CARD.

Name: \_\_\_\_\_ Cust. No.: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Please enroll me in the CHECKING AUTO PAY PLAN.

Bank Name \_\_\_\_\_ Routing #: \_\_\_\_\_

Bank Account #: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please enroll me in the CREDIT CARD AUTO PAY PLAN.

Payment Method: \_\_\_ VISA \_\_\_ MasterCard \_\_\_ American Express

Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name: \_\_\_\_\_ Billing Postal Code: \_\_\_\_\_

(as it appears on card)

Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Have my payments automatically paid from my chequing account or credit card on the **1st**.

—OR—

Have my payments automatically paid from my chequing account or credit card on the **15th**.

Your payments will be deducted on the 1st or 15th and posted to your account within 7 business days for a checking account and 3 business days for credit card payments

Fax this form to 705-737-9696 or mail (with voided check if appropriate) to:

D-tek-TION Security Systems Inc.

13-4 Alliance Blvd., Suite 454

Barrie, ON L4M 7G3