



20 Desjardins Drive
Winnipeg, MB R3X 0E8
Telephone: 204-985-5888

Doctors Manitoba Pre-authorized Debit Application

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

I/We authorize and instruct Doctors Manitoba and my/our designated financial institution (or any other financial institution I/we may authorize at any time) to deduct regular recurring payments for all charges arising from my/our Doctors Manitoba insurance(s) as indicated above. Monthly payments will be debited from my/our specified account on the 10th or 20th day of each month. Annual payments will be debited to my/our specified account on the first business day of January or June/July. I/We understand that the amount of the deduction may change at a future date and, if so, that pre-authorized debits will continue and reflect such changes. Doctors Manitoba will advise me/us in writing of the revised amount at least ten (10) days before the debit date.

I/We acknowledge and agree that Doctors Manitoba may charge me/us an administration fee of up to \$10 per occurrence for any dishonoured pre-authorized debit (including, but not limited to, non-sufficient funds, stop payments and closed accounts).

Doctors Manitoba may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least ten (10) days prior written notice to me/us.

I/We understand that this authority will remain in effect until I deliver to Doctors Manitoba a written notification from me/us changing or terminating it. I/We understand that I/we must provide at least ten (10) business days notice to Doctors Manitoba before the next debit is scheduled. I/We may obtain a sample cancellation form, or more information on my/our right to cancel, at my/our financial institution. I/We understand that I/we have certain recourse rights if any debit does not comply with this authorization. For example, I/we have the right to receive reimbursement for any debit that is not authorized or is not consistent with this authorization. I/We understand that I/we may obtain a form for a Reimbursement Claim, or more information on recourse rights, from my/our financial institution or at www.cdnpay.ca.

PLEASE PRINT

Name(s): _____

Address: _____

Phone Number: (Bus.) _____ (Res.) _____

Please select a deduction option(s)

Monthly Deductions – select all that apply

☐ Life Insurance ☐ Extended Healthcare ☐ Critical Illness – deducted on the 20th day of each month.

☐ Disability ☐ Office Overhead ☐ Accident Insurance – deducted on the 10th day of each month.

Annual Deductions – select all that apply

☐ Life Insurance ☐ Extended Healthcare ☐ Critical Illness – deducted on the 1st business day of January.

☐ Disability ☐ Office Overhead ☐ Accident Insurance – deducted on the 1st business day of June.

Financial Institution Name: _____

Account Number: _____ Transit Number (5 digits): _____ Bank Number (3 digits): _____

Or Attach a copy of a void cheque or bank authorization form from your financial institution. Credit cards and Line of Credit accounts are not eligible for deductions.

Please note that you should consult with your accountant before deducting Long Term Disability premiums from a Corporate Account.

Authorized Signature(s): _____ **DATE:** _____

Doctors Manitoba Pre-authorized Debit Application

Sample Cheque

Your Name
Any Street, Anytown
Tel: (001) 555-0000

DATE _____

PAY TO THE ORDER OF **Doctors Manitoba** \$ _____

100 DOLLARS

Security features included. Details on back.

Savings Bank
Any Street, Anytown
Tel: (001) 555-5555

RE _____

Bank # _____

MP

⑈ 001 ⑈ ⑈ 00002 003 ⑈ 4567 ⑈ 890 ⑈

Transit # Account #

Frequently Asked Questions

What is it?

Pre-Authorized Debit (PAD) is a payment method which allows you to pay your insurance premiums automatically.

Who is eligible?

Pre-Authorized Debit is available to all insured physicians who have a Canadian bank account.

How does it work?

You authorize the Doctors Manitoba to withdraw funds from your chequing account for the amount of your insurance premium, in equal payments, on the 10th or 20th of each month or annual payments on the 1st business day of January or June.

What does it cost?

There is a \$2.00 per deduction, per account, service charge applicable. In addition, your financial institution may charge a fee for this service but the amount should not exceed the charge for writing a cheque.

Will I still receive a bill?

Yes, you will continue to receive an annual invoice, on the policy anniversary date. This will provide you with an update of your insurance coverage and any monthly/annual premium adjustment for the following year.

How to sign up?

Complete and sign the Application form. If you prefer, you can attach a void cheque.

For monthly pre-authorized deduction **a separate cheque to cover the first month's premium should also be remitted.** On the 10th or 20th day of each month, your premium will be withdrawn automatically from your chequing account for premiums due the following month.

Applications for the PAD must be received at the Doctors Manitoba office.