



Payments in Lieu of Taxes: Applications On-line

Application for Electronic Data Interchange of Payments

1. Legal name of Taxing Authority (municipality, school board, province, or first nation's government):

2. Procurement Business Number **unique** to payments under the *Payments in Lieu of Taxes Act*.

3. Taxing Authority's Financial Institution Information

i. Name of Financial Institution: _____

ii. Branch Number: _____

iii. Financial Institution Number: _____

iv. Account Number: _____

v. Name of Account Holder: _____

vi. Financial Institution Stamp:

4. Authorized representative of Taxing Authority:

i. Name: _____

ii. Title: _____

iii. Telephone Number: _____

iv. Fax Number: _____

v. E-mail Address: _____

On completion, return this form to **Regional Manager, Payments in Lieu of Taxes,
Public Works & Government Services Canada**

at the appropriate address :

Atlantic Region
1713 Bedford Row
4th Floor
P.O. Box 2247
Halifax, NS
B3J 3C9
Fax: 902-496-5323

Quebec Region
Place Bonaventure,
South-East Portal
800 de La
Gauchetière Street
West, Suite 7300
Montreal, Quebec
H5A 1L6
Fax: 514-496-3766

National Capital
Area
191 Promenade du
Portage,
6th Floor,
Gatineau, Quebec
K1A 0S5
Fax: 819-956-7490

Ontario Region
4900 Yonge St
10th Floor
Willowdale, Ontario
M2N 6A6
Fax: 416-512-5553

Western Region
Suite 1000
Telus Plaza North
10025 Jasper
Avenue, 5th Floor
Edmonton, Alberta
T5J 1S6
Fax: 780-497-3802

Pacific Region
641-800
Burrard Street
15th Floor
Vancouver, BC
V6Z 2V8
Fax:
604-775-9364