



PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

I/we authorize Hydro One Brampton Networks Inc. and the financial institution designated (or any other financial institution I/we may authorize at any time) to begin deductions as per my/our instructions for regular recurring payments and/or one-time payments from time to time, for payment of all charges arising under my/our Hydro One Brampton Networks Inc. account(s). Regular monthly payments for the full amount of services delivered will be debited to my/our specified account on the cycle billing due date of each month. Hydro One Brampton Networks Inc. will provide 10 days written notice of the amount of each regular debit. Hydro One Brampton Networks Inc. will obtain my/our authorization for any other one-time or sporadic debits.

This authority is to remain in effect until Hydro One Brampton Networks inc. has received written notification from me/us of its change or termination. This notification must be received at least ten (10) business days before the next debit is scheduled at the address provided below. I/We may obtain a sample cancellation form, or more information on my/our right to cancel a PAD Agreement at my/our financial institution or by visiting www.cdnpay.ca.

Hydro One Brampton Networks Inc. may not assign this authorization, whether directly or indirectly, by operation of law, change of control or otherwise, without providing at least 10 business days prior written notice to me/us.

I/we have certain recourse rights if any debit does not comply with this agreement. For example, I/we have the right to receive reimbursement for my/our PAD that is not authorized or is not consistent with this PAD Agreement. To obtain a form for a Reimbursement Claim, or for more information on my/our recourse rights, I/we may contact my/our financial institution or visit www.cdnpay.ca.

PLEASE PRINT

DATE: _____

Name (s): _____ Hydro One Brampton Account Number: 01 _____

_____ Type of Service: Personal _____ Business _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

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

Name Financial Institution (FI): _____ Bank # _____

FI Account Number: _____ FI Transit Number: _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Authorized signature(s): _____

HYDRO ONE BRAMPTON NETWORKS INC.
Attention: Customer Accounts
175 Sandalwood Parkway West, Brampton, Ontario L7A 1E8
(905) 840-6300 (telephone)
(905) 452-5537 (fax)
cservice@hydroonebrampton.com

PLEASE ATTACH A VOID CHEQUE