SMART eSAVINGS™ ACCOUNT PRE-AUTHORIZED DEBIT (PAD) AND CREDIT (PAC) AGREEMENT



This agreement allows Bridgewater Bank to withdraw payments from your external bank account to your Bridgewater Bank Smart eSavings account.

Please read the terms and conditions, then complete all sections. Sign and return this form. Please remember to attach a blank personal cheque marked 'void' or fill in your bank account information below with a teller stamp from your financial institution, or provide a printed form of your banking information from your financial institution's secure online banking site.

CUSTOMER INFO	RMATION					
Customer	First Name		Middle Name (Initia	l) Last Name		
	Contact Address			Telephone Number		
Joint Customer (if applicable)	First Name		Middle Name (Initia) Last Name		
Type of Service	Smart eSavings Account					
New application dated:	Or, existing account number:					
EXTERNAL BANK	ACCOUNT INFOR	MATION				
Name of Financial Institution						
Address of Financial Institution			Teller sta	Teller stamp required if void cheque or banking printout is not attached.		
Account Number						
Branch Transit Number (5	digits) Bank N	umber (3 digits)				
PRE-AUTHORIZE	D DEBIT TERMS 8	& CONDITIONS				
In this agreement, 'l', '	me', and 'my' refers to	each account holder v	who signs below and	is a party to this agreement:		
1. Debits at Set Inter		caon account notae. •	The digital bolow and	no a party to ano agreement		
I authorize Bridgewa	ater Bank and the finan	-		ne external bank account ider	ntified above as follows	
	ns to my Smart eSaving		ewater Bank identifi	ed above:		
Amount: \$		25.00 or more)				
Frequency: (please check one)	Weekly	Bi-weekly (every	/ 2 weeks)	Semi-montly (twice a month)	Monthly	
Start Date:	(Must be at	least 30 days after you	u provide this form t	o Bridgewater Bank)		
I understand that ar	ny debit falling on a non	ı-business day will be	processed on the ne	ext business day.		
	ese debits will be witho request or authorize u		al bank account ider	ntified above regardless of any	/ other sporadic debits	

#2528 (13-AUG-2021)



2. Sporadic Debits and Credits

I authorize Bridgewater Bank and the financial institution designated above to transfer funds between the external bank account identified above and my Smart eSavings account with Bridgewater Bank identified above in such amounts and on such dates as I instruct Bridgewater Bank from time to time. Such instructions will be subject to Bridgewater Bank's right to limit the amount and other aspects of funds transfers as described in my Personal Account Terms and Conditions. Each debit from my external bank account must be \$25.00 or more. If I wish to instruct such a transfer, I will call Bridgewater Bank at 1.866.243.4301 or use any other method that Bridgewater Bank accepts. I will be required to satisfy Bridgewater Bank's verbal or other customer authentication requirements in order to validate my request, and this will constitute authorization for Bridgewater Bank to process the transaction requested.

- 3. I waive my right to receive pre-notification of the amount of each debit referred to above and I agree that I do not require advance notice of the amount of pre-authorized debits before the debits are processed. The authorizations to conduct funds transfers provided under this agreement are for the benefit of the external financial institution identified above and Bridgewater Bank and I authorize Bridgewater Bank to process such funds transfers in accordance with the rules of the Canadian Payments Association and my Personal Account Terms and Conditions. I confirm that Bridgewater Bank is unable to guarantee the date my funds will arrive in either my external bank account or my Bridgewater Bank account identified above.
- 4. I understand that I may request changes to the amount, frequency and date of any debits authorized under this agreement and these changes will not require completion of a new agreement. If I wish to make a change, I will call Bridgewater Bank at 1.866.243.4301 at least 10 days before the next scheduled debit or credit, or use any other method that Bridgewater Bank accepts. I will be required to satisfy Bridgewater Bank's verbal or other customer authentication requirements in order to validate my request, and this will constitute authorization for Bridgewater Bank to make the change requested.
- 5. I acknowledge that in order to change my Bank account information I must complete a new Bridgewater Bank Smart eSavings Pre-Authorized Debit and Credit Agreement form and submit a new "VOID" cheque OR complete the bank account information section with a teller stamp from my financial institution. I understand that such notification must be received by Bridgewater Bank at least 10 days prior to my next scheduled debit or credit. This agreement form is available online at **bridgewaterbank.ca** or by calling Bridgewater Bank at 1.866.243.4301.
- 6. I may cancel this agreement at any time, provided that I give notice to Bridgewater Bank by calling 1.866.243.4301 or in writing at the address or fax number below at least 10 days prior to the date of the next scheduled debit or credit, as the case may be. To obtain a sample cancellation form or for more information on my rights to cancel this agreement, I may contact Bridgewater Bank, the financial institution identified above, or visit payments.ca. I understand that the cancellation of this agreement will take effect only when the cancellation is received and acknowledged by Bridgewater Bank. I also understand that cancelling this agreement does not revoke or amend the terms and conditions of my Personal Account Terms and Conditions or any other agreement that exists between me and Bridgewater Bank.
- 7. I have attached a PERSONALIZED void cheque OR provided my bank account information above with a teller stamp from my financial institution. (I understand that if I am providing a cheque drawn on the external Bank account identified above to fund the initial deposit to the Smart eSavings account, it will not be necessary to provide the void cheque or bank confirmation referred to in this paragraph.) I confirm that this account is drawn from a Canadian Financial Institution and is my personal account and understand that cheques drawn from business accounts will not be accepted.
- 8. I certify that **ALL PERSONS** whose signatures are required to sign on both the external bank account and the Bridgewater Bank account(s) identified in this agreement have signed the authorization below.
- 9. I acknowledge that the debits and credits contemplated by this agreement are/will be funds transfer PADs, meaning debits authorized by a person by which funds are moved among the person's accounts held at different financial institutions. As such, I will not have recourse rights through the Canadian Payments Association rules if any debit made does not comply with this agreement. To obtain more information, I may contact my financial institution identified above, Bridgewater Bank or visit payments.ca. If a discrepancy occurs in a funds transfer PAD that I initiate through Bridgewater Bank, I may contact Bridgewater Bank at 1.866.243.4301 and one of their representatives may be able to assist me in clarifying the matter.



Signature of Account Holder						
Name (please print)	Date					
Signature of Joint Account Holder						
Name (please print)	Date					

When you have completed and signed this agreement, please mail this form with either your void cheque or provide your bank account information above with a teller stamp from your financial institution to the address below. Alternatively you can fax this form to 1.877.733.8946. (The void cheque or confirmation is not necessary if you are providing a cheque drawn on the same account to fund the initial deposit to your Smart eSavings account.) Please keep a copy of this agreement for your records. If you have any questions or wish to obtain further information regarding this agreement, please contact us at:

Bridgewater Bank

150, 926 5th Avenue SW Calgary AB T2P 0N7

P 1.866.243.4301 | F 1.877.733.8946

customer.experience@bridgewaterbank.ca

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