

Phone: 204-954-4978 Toll free in Canada: 1-855-954-4321 Website: www.wcb.mb.ca

Pre-Authorized Payment Form

Employer Information

WCB Account Name

WCB Account Number

Mailing Address

City

Province

Postal Code

Phone Number (Include Area Code)

Note: This agreement must be received in original form. We cannot accept any forms received via email or fax.

Credit Card Information

WCB Account Number

Master Card

Name on Card

Pre-Authorized Terms and Conditions

MM - YY

The Workers Compensation Board of Manitoba (WCB of Manitoba) will provide a written and/or online statement of the amount and date of the pre-authorized credit card payment at least ten (10) calendar days before the date of each pre-authorized payment.

Returned payment fees will be charged to my/our account if the pre-authorized credit card payment is declined.

I/We agree that this agreement:

Card Number

Expiry Date

- may be cancelled by the WCB of Manitoba verbally or by written notice to my/our billing address prior to the next payment;
- may be cancelled by me/us by phone, in person or written notice before the next payment date (10 calendar days prior notice is required). Cancelling pre-authorized credit card payment on an account may result in changes to my/our installment plan.

I/We acknowledge that I/we have read and understood all of the terms and conditions of this Pre-Authorized Credit Card Agreement. I/We (include all required signatures) authorize the WCB of Manitoba to begin pre-authorized payments for payment of my/our WCB of Manitoba statement from the credit card identified in the above information.

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Signature	dd/mm/yyyy	

Note: The WCB of Manitoba must receive this information 5 business days prior to the due date on your statement in order to ensure the pre-authorized information is updated in time for payment. You are responsible to ensure that your account is paid by the due date if the pre-authorized information has not been updated. To receive confirmation that this update has been made to your account, please provide your email address or fax number below. If you have questions or concerns about the time frames, please contact us at 204-954-4978.

Email Address	Fax Number (include area code)	

Please mail or deliver this form to the following address:

WCB of Manitoba 333 Broadway Winnipeg, MB R3C 4W3