Income Assistance

Form E – Payment Authorization to a Third Party

Case Number:

Applicant Information

Last Name		First Name				
Telephone	Ţ	Date of Birth (YY/MM/	′DD)	/	/	
Current Mailing Address						
Community		, NT	Postal Code			

Authorization Agreement

I, of the City/Community of in the Northwest Territories, authorize the Department of Education, Culture and Employment, Government of Northwest Territories, to directly make payment(s) to the following from my Income Assistance benefits:					
	Name/Company	Amount			
Rent					
Power					
Water					
Heating					

Garbage/Sewer	
Repayment Plan/Arrears	
Taxes and Insurance	
Other	

Declaration

I understand the information on this form will be used for the sole purpose of making payments directly to vendors on my behalf from my Income Assistance benefits. I understand if there are any changes to my personal or financial situation, I must immediatly report it to my Client Services Officer.

Applicant Signature

Date (YY/MM/DD)

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This information is being collected under the authority of the *Access to Information and Protection of Privacy (ATIPP) Act*, section 41.(1)(g) and the *Northwest Territories Social Assistance Act and Income Assistance Regulations*. The privacy provisions of the ATIPP Act protect information, and all applicants have the right to examine and request correction of his or her records and to request a review by the Information and Privacy Commissioner. If you have any questions about the collection of information, contact the Department of Education, Culture and Employment, Box 1320, Yellowknife, NT X1A 2L9 or call 1-866-973-7252 or 867-767-9355