



150 Frederick Street, Kitchener, Ontario N2G 4J3
Telephone: (519) 575-4400 Fax: (519) 575-4547
Email: accountspayable@regionofwaterloo.ca

VENDOR REQUEST FOR PAYMENT BY DIRECT DEPOSIT

I request the Regional Municipality of Waterloo to directly deposit payment to the bank account specified below.
The banking information provided will only be used by the Regional Municipality of Waterloo for the purpose of making payments.

Vendor Information:

Company Name: _____

Address: _____

City: _____ Postal Code: _____

Tel: _____ Fax: _____

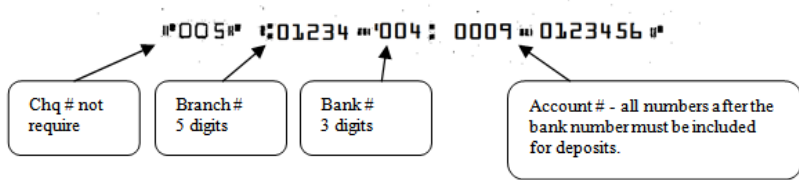
Email: _____

(Required for remittance advice transmission)

Bank Information:

Bank Name: _____ Bank Tel: _____

Branch #: [5 digit boxes] Institution #: [3 digit boxes] Account#: [7+ digit line]
(5 DIGITS) (3 DIGITS) (MINIMUM 7 DIGITS)



I have authority to bind my company to this agreement.

Authorized Signature: _____ Print Name: _____

Position: _____ Date: _____

A Void Cheque Must Be Included To Process Payment. If account is closed or changed, please notify the Region of Waterloo immediately at accountspayable@regionofwaterloo.ca. The Region of Waterloo does not take responsibility if the information included on this form is incorrect when a VOID cheque is not included.

TO BE COMPLETED BY THE REGIONAL MUNICIPALITY OF WATERLOO

Vendor ID#: _____ Date Connected: _____ Connected By: _____