



ELECTRONIC FUNDS TRANSFER (EFT) APPLICATION

REQUIRES ATTACHMENT OF VOID CHEQUE OR
FINANCIAL INSTITUTION VERIFICATION

Part 1 – Registered Supplier Name

This payee name must be indicated on all requested for payment and **must** match the name listed on the bank account and the name associated with the supplier number.

Business Name	
<input type="text"/>	
Daytime Phone Number	Email Address
<input type="text"/>	<input type="text"/>
Street Number & Name	Postal Code
<input type="text"/>	<input type="text"/>

Part 2 – Banking/Financial Institution Information

This payee name must be indicated on all requested for payment and **must** match the name listed on the bank account and the name associated with the supplier number. All applications **must** include a void cheque.

Bank/Institution Name	Transit Number	Institution Number	Account Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank/Institution Address			Postal Code
<input type="text"/>			<input type="text"/>

Part 3 – Authorization

<input type="checkbox"/>	INITIATE direct deposit to above noted account
<input type="checkbox"/>	CHANGE banking information currently on file
<input type="checkbox"/>	CANCEL banking information currently on file

Signature of Supplier/Authorized Supplier Representative

I, THE UNDERSIGNED, AUTHORIZE THOMPSON-NICOLA REGIONAL DISTRICT (TNRD) PAYMENTS TO BE DIRECT DEPOSITED INTO THE BANK ACCOUNT PROVIDED ABOVE, UNTIL FURTHER NOTICE.

Name	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Freedom of Information and Protection of Privacy Act (FOIPPA)

The personal information requested on this form is collected under the authority of the *Financial Administration Act* in compliance with the FOIPPA and will be used to process your Direct Deposit Application. The financial information contained above is protected under the provisions of the FOIPPA and will be used only for direct deposit by means of electronic funds transfer.

ELECTRONIC FUNDS TRANSFER INFORMATION	INTERNAL USE ONLY
<ul style="list-style-type: none">- Complete Part 1 through 3, attach a VOID cheque or obtain FI domicile stamp, and email to ap@tnrd.ca- All invoices to be paid via Electronic Funds Transfer must be submitted electronically to ap@tnrd.ca- Do not close your bank account prior to confirming that the Electronic Funds Transfer service information has been updated for Thompson-Nicola Regional District payments. Closing the account prior to updating the account information will result in the payment being delayed.- If the payment cannot be deposited to the banking information on file, a cheque will be issued and mailed to the address information on file,- Your EFT information will remain in effect until you update the information or cancel the service by submitting a new Electronic Funds Transfer Application form. Forms can be obtained from tnrd.ca or by emailing ap@tnrd.ca	<p>Supplier Inquiry and Maintenance:</p> <p>Payment Info Type "T" & Bank Info Entered</p> <p>Completed By: _____</p> <p>Reviewed By: _____</p>