

4310 Queen Street Niagara Falls, ON L2E 6X5 905 356-7521 x4304 or 4308 ap@niagarafalls.ca www.niagarafalls.ca

To Whom It May Concern,

The City of Niagara Falls has implemented Direct Deposit Electronic Funds Transfers (EFT) for issuing payments and email delivery of EFT notifications.

To receive EFT payments and notifications, please complete and return the form on the reverse side of this letter along with a **VOID cheque** or Pre-Authorized Payment form to ap@niagarafalls.ca. Please contact us if you have any questions about EFT registration or require future updates to your company or banking information.

All banking information is confidential and is used only for direct deposit purposes.

Yours truly,

Accounts Payable

City of Niagara Falls



ELECTRONIC FUNDS TRANSFER AUTHORIZATION FORM

PAYEE INFORMATION												
Date		Remittance Email				1						
Company Nan Individual Firs			•		'							
Mailing Address	·					* HST gistration#			Phone #			
City				Province								
* HST Regis	tration is n	ot appl	icable for 1									
BANKING INFORMATION												
Financial Institution Name												
Branch Address												
City				Province				Postal Code				
Bank Code				Transit #				Account #				
I have enclosed a void cheque or Pre-Authorized Payment form.												
I/We hereby authorize The Corporation of the City of Niagara Falls to deposit to my/our account indicated above for the purpose of issuing payments. This authorization is to remain in effect until the payer has received written notification of termination in such time and manner as to afford the payer in writing of any bank account changes and/or closures a minimum of 30 days in advance. For a joint account, all depositors must sign if more than one signature is required on the payments issued against the account.												
Date					Date							
Signature					Signatur	re						
Printed Name					Printed Name							
Title					Title							
Prior to issuing your 1 st payment, the City will call to verify the banking information provided. Please provide the appropriate contact information below.												
Name					Phone #	:						
Email						<u>.</u>						