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Niagara Falls, ON L2E 6X5  
905 356-7521 x4304 or 4308  
[ap@niagarafalls.ca](mailto:ap@niagarafalls.ca)  
[www.niagarafalls.ca](http://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](mailto: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				
Company Name or Individual First/Last Name						
Address			HST Registration #		Phone #	
City		Province		Postal Code		

### 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		Signature	
Printed Name		Printed Name	
Title		Title	

Prior to issuing your 1<sup>st</sup> payment, the City will call to verify the banking information provided. Please provide the appropriate contact information below.

Name		Phone #	
Email			

Please email completed form to:  
[ap@niagarafalls.ca](mailto:ap@niagarafalls.ca)