

## Re: Electronic Funds Transfer - Bank Account Update

Dear Valued Supplier,

The Municipality of Kincardine requires that all existing vendors requesting to have their bank account information changed to a new bank account, to please complete the form below. This will not only ensure that our vendor records are up to date but will also serve as an additional security measure to prevent fraud. Once the completed form has been returned, all future payments will be deposited into your new bank account as requested.

Please complete the form and return it either by fax, mail or email with a void cheque or statement from your bank to:

Municipality of Kincardine Attn: Accounts Payable 1475 Concession 5, RR#5 Kincardine, ON N2Z 2X6

Fax: (519) 396-1488

Email: accountspayable@kincardine.ca

If you have any questions, please feel free to contact me.

Sincerely,

Alex Neitzel, Accounts Payable Clerk 519-396-3468 x.7102



Municipal Administration Centre 1475 Concession 5, RR#5 Kincardine, ON N2Z 2X6 Phone: (519) 396-3468

## **EFT Authorization Form – Bank Account Update**

| Company Name:                           |                  |                   |  |
|---|------------------|-------------------|--|
| Business Number:                        |                  |                   |  |
| Address:                                |                  |                   |  |
|   |                  |                   |  |
| Contact Name:                           |                  |                   |  |
| Contact Phone Number:                   |                  |                   |  |
| Remittance Email Address:               |                  |                   |  |
| PREVIOUS Bank Acco                      | ount             |                   |  |
| Financial Institution:                  | -                |                   |  |
| Address:                                |                  |                   |  |
|   |                  |                   |  |
| Transit Number:                         |                  |                   |  |
| Institution Number:                     |                  |                   |  |
| Account Number:                         |                  |                   |  |
| CURRENT Bank Acco                       | unt ( <b>P</b> I | oid cheque)       |  |
| Financial Institution:                  |                  |                   |  |
| Address:                                |                  |                   |  |
|   |                  |                   |  |
| Transit Number:                         |                  |                   |  |
| Institution Number:                     |                  |                   |  |
| Account Number:                         |                  |                   |  |
| **All future payments will be deposited | into this ad     |                   |  |
| Authorized Signature(s):                |                  | Print Name/Title: |  |
|   |                  |                   |  |
|   |                  |                   |  |
| Date:                                   |                  |                   |  |
|   |                  |                   |  |