



**ELECTRONIC FUNDS TRANSFER INFORMATION**

- Complete Parts 1 through 3, attach a "void" cheque or Direct Deposit form from your bank and email to [financialservices@rdffg.bc.ca](mailto:financialservices@rdffg.bc.ca).
- Do not close your bank account prior to confirming that Electronic Funds Transfer service information has been updated for the Regional District of Fraser-Fort George 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, you will be asked to provide alternative banking information in order to process your payment.
- Your EFT information will remain in effect until you update the information by submitting a new Electronic Funds Transfer Application form. Forms can be obtained by emailing [financialservices@rdffg.bc.ca](mailto:financialservices@rdffg.bc.ca) or at [www.rdffg.ca](http://www.rdffg.ca)

**PART 1 – Registered Supplier Name**

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

*BUSINESS NAME*

MAILING ADDRESS - Is this a change of address?  YES  NO

POSTAL CODE

EMAIL – for delivery of Electronic Statement or Payment

PHONE NO. – Area Code/Phone No.

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**PART 2 – Banking/Financial Institution Information**

*BANK/FINANCIAL INSTITUTION NAME*

MAILING ADDRESS

POSTAL CODE

*Transit No. (must be 5 digits)*

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*Institution No.*

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*Bank Account No. (left justified)*

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**PLEASE INCLUDE A VOID CHEQUE or DIRECT DEPOSIT FORM FROM YOUR BANK.**

If not available, have your Financial Institution verify your account information.

**PART 3 - Authorization**

*INITIATE* Payments to the above account.

*CHANGE*

*CANCEL* – provide banking information currently on file

*BANK/FINANCIAL INSTITUTION NAME*

*Transit No. (must be 5 digits)*

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*Institution No.*

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*Bank Account No. (left justified)*

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**Signature of Supplier/Authorized Supplier Representative**

I, the undersigned, authorize the Regional District of Fraser-Fort George payments to be direct deposited into the Bank Account provided above, until further notice.

Signature

Print Name

Signed (YYYY/MM/DD)

**Freedom of Information and Protection of Privacy Act (FOIPPA)**

The information collected on this form will only be used for the purpose of processing and implementing your Direct Deposit Application. This information is collected and distributed in strict accordance with the FOIPPA. For any questions regarding the collection or distribution of this information, please contact General Manager of Legislative and Corporate Services [foi@rdffg.bc.ca](mailto:foi@rdffg.bc.ca) or (250) 960-4400.