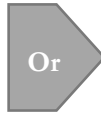




DIRECT DEPOSIT AUTHORIZATION FOR ELECTRONIC FUNDS TRANSFER (EFT)

Use this form to:

Start direct deposit payments



Change information previously submitted

Effective date:

Contact Information

Vendor number (if known):

Name of company or person to receive payment:

Street Address:

Contact person:
Title or position:

Phone:
(enter number without dashes)
E-mail:

Confirmation of Deposits

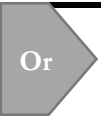
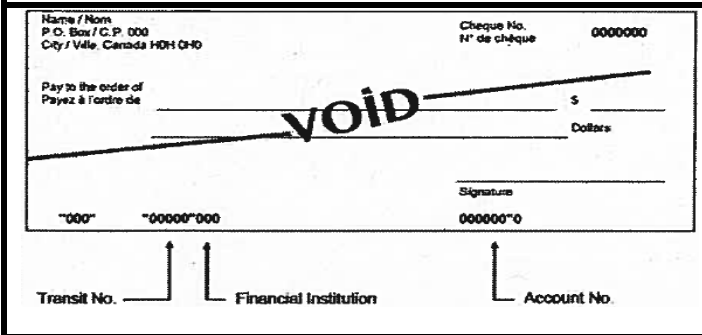
Your bank statement will show payment from Cowichan Valley Regional District. We will send you an e-mail confirmation when we deposit a payment to your account.

E-mail address for confirmation of deposit:

Bank Account Information for Deposits

Please attach a blank cheque with your bank information on it.

Write void across the front.



Name of bank or other financial institution:

Address or branch where account is held:

Transit No.:
Institution No.:

Account No.:

Teller Stamp:

Authorized Electronic Funds Payments:

I authorize Cowichan Valley Regional District (CVRD) to deposit, by electronic fund transfer, payments owed to me. The CVRD will deposit the payments in the bank account designated above. I recognize that I am responsible for payment errors that result from incomplete or inaccurate information on this form.

Forward completed signed form and voided cheque either by mail, email or fax to:

Cowichan Valley Regional District
Attention: Finance Division
175 Ingram Street, Duncan, BC V9L 1N8
Email: ap@cprd.bc.ca

Authorized signature:
Printed name:
Title:
Date:

Questions?

Call 250.746.2576 or
E-mail: ap@cprd.bc.ca