Electronic Funds Transfer (EFT) Authorization Agreement

UNIVERSITY OF WATERLOO

Transaction Type

☐ Add EFT Information for New Supplier or ☐ Add or Change EFT Information for Existing Supplier or ☐ Cancellation

Request Date

_____ mm/dd/yy

Supplier Information

Supplier Name: _____ Supplier #: _____ (can be found on your remittance)

Alternate Name*: _____ **If different from the supplier name*

Supplier Address:

_____ _____ _____ _____ _____

Street Address | City | Province | Postal Code | Phone Number

Contact Name: _____ Phone Number: _____

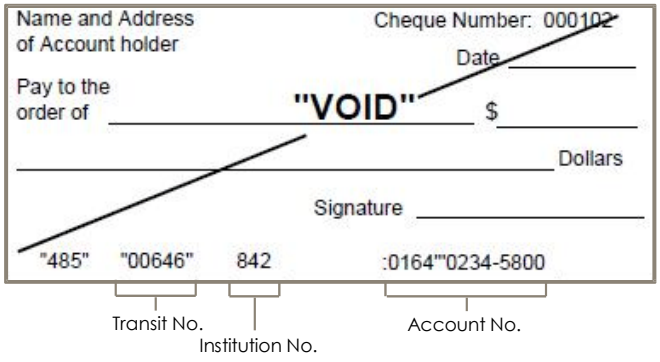
Remittance Email Address: _____

Direct Deposit Information - You MUST provide a void cheque or a letter from your bank on bank letterhead confirming the information provided below. As an additional security measure, prior to updating your banking information, University of Waterloo Accounts Payable staff will be calling your organization to validate that you did submit this request to add/update your banking information.

Banking Information

Please attach a void cheque or bank letter

Type of Account: ○ Business ○ Personal



Bank Name: _____

Bank Address:

_____ _____

Street Address | City

_____ _____ _____

Province | Postal Code | Phone Number

Transit No.: _____ Institution No.: _____

Account No.: _____

Please use this form to notify us immediately if your banking arrangements change.

Authorization

I (we) hereby authorize University of Waterloo to direct payments electronically to the bank account specified here. I (we) acknowledge that the origination of the EFT transactions to my (our) account must comply with the provisions of Canadian law. This authorization agreement is effective as of the effective date above and is to remain in full force and effect until University of Waterloo has received notification of its termination. I (we) agree to submit an updated EFT Authorization Agreement to University of Waterloo for the cancellation of this agreement or to make any changes to the information provided within this agreement.

Authorized Signature: _____

Printed Name: _____

Title: _____

_____ _____

Phone Number | Date (mm/dd/yy)

Scan and email the completed form and void cheque or bank letter to:
appayments@uwaterloo.ca

Questions?
Email appayments@uwaterloo.ca

The University of Waterloo gathers and maintains information used on this form for the purpose of electronic fund transfers. Information is collected under the authority of the University of Waterloo Act, 1972. Information will be protected, used, and released in compliance with Ontario's Freedom of Information and Protection of Privacy Act (R.S.O. 1990, c. F.31) and University of Waterloo policies. Questions about the collection, use, and disclosure of personal information by the University, should be directed to the Privacy Officer, Secretariat, University of Waterloo, 200 University Avenue West, Waterloo, Ontario, Canada N2L 3G1. The email address of the Privacy Officer is fippa@uwaterloo.ca.