

Town of Sidney Pre-Authorized Vendor EFT Payment Plan

The Pre-Authorized Vendor EFT Payment Plan provides an opportunity for vendors to be paid via Electronic Funds Transfer (EFT) directly into their bank account rather than by cheque. The payments are made by authorizing the Town to make an automatic transfer to a chequing account at any Canadian financial institution in order to satisfy a bill or invoice for goods or services sold to the Town. Once you are enrolled, <u>ALL</u> payments will be made to you by EFT unless you withdraw from the plan.

Plan Details

- 1) The Vendor provides their banking information to the Town of Sidney.
- 2) The Town will pay the Vendor by a direct transfer (EFT) into the Vendor's bank account, not by cheque.
- 3) The Town will e-mail a notification to the Vendor with payment details, showing the total payment amount, which invoices are being paid and how much is being paid for each invoice.

Eligibility Guidelines

- 1) A bank account at a Financial Institution in Canada.
- 2) An Enrolment Form (see reverse) must be completed and submitted with one of the following:
 - a blank cheque marked "VOID", or
 - a clear photocopy of a blank cheque marked "VOID", or
 - a stamped document from your bank with bank account information.

Requesting Changes

Written notification to the Town of Sidney is required 15 days prior to a payment date for the following changes:

- Changing your bank account, bank, or branch; or
- Withdrawal from Pre-authorized Vendor EFT Payment Plans.

Contact / Sign-up Options

In order to enrol or make changes, please provide a completed Enrolment Form (see reverse) and banking information:

- In person, to the Finance Department at the Town of Sidney Municipal Hall, 2440 Sidney Ave.
- E-mail PDF copies to: accountspayable@sidney.ca
- Fax them to 250-655-4508, or
- Mail them to: Town of Sidney

Attention: Accounts Payable 2440 Sidney Avenue SIDNEY, BC V8L 1Y7 Phone: 250-656-1184



Town of Sidney Pre-Authorized Vendor EFT Payment Plan Enrolment Form

□ New enrolment
☐ Banking Information Change
Vendor Name:
E-mail address (for payment notifications):
Phone # & Contact Name :
Financial Institution Name:
Banking Information for depositing purposes:
Institution # Bank (Branch) Transit #
Bank Account #
I / We hereby authorize THE TOWN OF SIDNEY to credit my/our account at the institution indicated above in order to pay for goods and/or services that I/we have sold and provided to the Town of Sidney.
AUTHORIZED SIGNATURE(S):
DATE:
All signatories must sign if more than one signature is required on cheques issued against the account for verification nurnoses. This

All signatories must sign if more than one signature is required on cheques issued against the account for verification purposes. This authorization may be cancelled any time upon 15 days written notice. Any delivery of this authorization to you constitutes delivery by the signatory.

Please attach one of your cheques, or a clear copy thereof, marked 'VOID". Alternatively, attach a stamped document from your bank detailing the account information.

Send to the attention of: ACCOUNTS PAYABLE, TOWN OF SIDNEY, 2440 SIDNEY AVE, SIDNEY, BC, V8L 1Y7