



University of Windsor

SUPPLIER DIRECT DEPOSIT

Direct Deposit services are currently only available for Canadian bank accounts

Cheques will be issued for all USD payments. If you require a payment to be made in an international currency (other than USD) please contact Accounts Payable for information on the Wire Payment Process.

Application Type: New Application [] Change of Information [] Cancel Direct Deposit []

Please ensure all flags marked as required (*) are completed. Payment to Supplier will not be issued until all required direct deposit information is received by the University of Windsor.

Company Information

The Supplier Name and Address provided below, must agree exactly to the following:

- Supplier Name and Address on the void cheque or Letter of Guarantee from the bank,
Supplier Name and Address on the submitted PO09 Supplier Update/Addition Form

Supplier Name*: _____

Supplier (Remit to) Address*: _____

Contact Name/Officer*: _____ Title*: _____

Phone*: _____ Email*: _____

Email for where EFT Remittance Confirmation can be sent (If different from above)*: _____

Banking Information

*A void cheque is required to verify all bank information provided below. If void cheque is not available, attach a Letter of Guarantee from bank confirming banking information. The banking information below must agree exactly to banking information on the void cheque or Letter of Guarantee from the Bank:

Bank Account No.*: _____ Account Type: Chequing [] Saving []

Bank Institution No.*: _____ (3 digits) Bank Transit No.*: _____ (5 digits)

Bank Name or Financial Institution*: _____

Branch Address*: _____

City*: _____ Province*: _____ Postal Code*: _____

Supplier Direct Deposit Form Completion Checklist*:

- All required information is completed
- Supplier Name and Address agree to the void cheque/Letter of Guarantee from the bank
- Void cheque/Letter of Guarantee from the bank has been attached to this application
- Application has been signed below, authorizing consent to UWindsor to use the banking information provided

Authorization

I authorize the University of Windsor to credit the bank account indicated above. I will notify Accounts Payable in writing if I change the account from one bank or branch to another, or if there is any other change. I have retained a signed copy of this authorization form. **Your typed name below indicates your approval of the form and confirms that all information is accurate.**

Employee's Signature _____ Date _____

Re: Collection of Personal Information

The information collected for Supplier Direct Deposit is collected under the authority of the University of Windsor Act and is collected for the purpose of providing direct deposit of funds for payment of invoices. Information provided to the Finance Department for Supplier Direct Deposit will be used only for that purpose and will be accessed only by persons so authorized.

OFFICE USE ONLY

Approved by Date System Updated by Date

Setup Verified by Date UWINSITE Supplier Number

Submit Form to: EFT@uwindsor.ca. If there are any questions while filling out the form, please contact ext. 2081.