



DIRECT DEPOSIT/ELECTRONIC FUNDS TRANSFER (EFT) VENDOR PAYMENT ENROLLMENT FORM

Mail to: Treasurer, Village of Monroe, 7 Stage Road, Monroe, NY 10950; or

Fax to: Treasurer, Village of Monroe (845) 782-3006

Instructions: Please complete all sections of this Enrollment Form and attach a voided check or a copy of an encoded deposit slip that includes an imprinted vendor's name. **Note: Your application cannot be processed without this documentation.** See the reverse side for more information and instructions.

Section I – Vendor Information

Social Security Number or Taxpayer ID Number:

Vendor Name:

Vendor's Address (for EFT Enrollment Purposes)

Vendor's E-mail address:

Contact Person Name:

Contact Person Telephone Number:

Section II – Financial Institution Information

Bank Account Number:

Account Name:

Bank Name:

Bank Branch Address:

Routing Transit Number (located at the bottom left hand corner of check)

Account Type – Must be either Checking or Savings

Check One Box Only:

Checking Savings

Direct Deposit/ACH/EFT Coordinator's Name:

Telephone Number:

Section III – Vendor Signature

Vendor Signature:

Print Name:

Date:

DIRECT DEPOSIT/ELECTRONIC FUNDS TRANSFER (EFT) VENDOR PAYMENT ENROLLMENT FORM

General Instructions

Please complete all sections of the Direct Deposit EFT Enrollment Application and forward the completed application along with a voided check or a copy of an encoded deposit slip that includes an imprinted vendor's name to:

Mail to: Treasurer, Village of Monroe, 7 Stage Road, Monroe, NY 10950; or

Fax to: Treasurer, Village of Monroe (845) 782-3006

Section I – Vendor Information:

1. Enter the vendor's social security number or taxpayer ID number, the 9-digit number reported on the W-9 form.
2. Provide the name of the vendor (as it appears on the W-9).
3. Enter the vendor's complete address, if you have one.
4. Indicate the name and telephone number of the vendor's contact person. (If you are enrolling yourself individually, you are the contact person.)

Section II – Financial Institution Information

1. Indicate the vendor's bank account number.
2. Indicate the vendor's account name.
3. Provide the bank's name.
4. Provide the complete address of your bank.
5. Indicate the 9-digit routing (ABA) transit number (located on the bottom left hand corner of your check)
6. Indicate the type of account. Account must be designated as either checking or savings. (Check one box only.)
7. List name and telephone number of your bank's Direct Deposit/EFT Coordinator.

Section III – Vendor Signature

Sign and date where indicated.