



## ELECTRONIC FUNDS TRANSFER (EFT) REQUEST AND AUTHORIZATION FORM

### REQUEST TYPE

New Application       Change Financial Institution/Banking       Cancel Direct Deposit (revert to cheque)

### SUPPLIER DETAILS (please print)

Supplier:		
Address:		Phone:
City:	Province:	Postal Code:
Email address for remittance advice:		

### BANK/FINANCIAL INSTITUTION INFORMATION

To ensure the accuracy of your account information, **you must attach a corporate void cheque or an authorized bank form** and provide the following financial information:

Name of Financial Institution					Address:														
Transit Number (5 digit number)					Institution Number (3 digit number)			Business Bank Account No.											

### CHANGE OF INFORMATION – PRIOR BANKING INFORMATION

If you are changing your banking information, please enter NEW banking information above and submit the PRIOR banking information below.

Name of Financial Institution					Address:														
Transit Number (5 digit number)					Institution Number (3 digit number)			Business Bank Account No.											

### Authorization requires two authorized signatures to safeguard your organization

I/We authorize Professional Engineers Ontario to make all payments by direct deposit into the above bank account. I/We have attached a void cheque, or an authorized bank form. I/We have the authority to provide the above information on behalf of the corporation/organization/payee. I/We agree that Professional Engineers Ontario will not be liable for any loss occurring after the deposit has been made to the identified bank account. I/We also agree that any direct deposits received in error will be promptly returned to Professional Engineers Ontario.

Name (Printed)		Name (Printed)	
Title	Phone Number	Title	Phone Number
Signature	Date (dd-mm-yy)	Signature	Date (dd-mm-yy)

<p><b>Please email or mail the original completed application package to:</b> Professional Engineers Ontario Financial Services 101 - 40 Sheppard Ave. West Toronto, ON M2N 6K9 <b>Email address:</b> apfinancialservices@peo.on.ca</p>	<p>Bank Stamp</p>	<p><b>Professional Engineers Ontario Use Only</b></p> <p>Vendor ID: Checked By: Checked Date: Approved By: Approved Date: Processed By: Processed Date:</p>
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All information (including banking information) collected in this form will be used to make direct deposit payments to your company's bank account in payment of amounts owing. Questions about this collection may be directed to the Accounting Supervisor, Jenny Zang at 416-224-1100 ext.1208.