

New Set Up
 Cancellation
 Change of Information
 Effective Date

VENDOR INFORMATION:

Legal Name		
Company Address		
Street Number	Street Name	Suite/Floor/Unit
City	Province	Postal Code
Remittance Address (if different from Above)		
Street Number	Street Name	Suite/Floor/Unit
City	Province	Postal Code
Remittance Contact Name:		Title
Remittance Email Address*		Phone Number
<small>*The Remittance email detailing the invoice number, invoice amount paid, date of the payment and the total dollar value of the payment will be sent to the remittance email address specified above.</small>		

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT

Banking Information

Please attach a voided cheque

Type of Account : Chequing Savings

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 information changes.

I hereby authorize Morrison Hershfield and its entities to direct payments electronically to the bank account specified. I acknowledge that the origination of EFT transactions to the specified account must comply with the provisions of Canadian Law. This authorization agreement is effective as of the date above and is to remain in full force and effect until Morrison Hershfield has received notification of its termination. I agree to submit an updated EFT Authorization Agreement Form to Morrison Hershfield 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: _____

Authorization Date: _____

Scan and email the completed form and voided cheque to:
vendors@morrisonhershfield.com

Questions?
 Email vendors@morrisonhershfield.com
 Tel. 416-499-3110 || Toll Free: 1-888-649-4730
 ask for Accounts Payable

If your company is using an email filtering program ("SPAM-blocker"), Morrison Hershfield remittance emails could be blocked. To ensure that you receive your remittance advice, contact your network administrator and have the following email address added to your company's "safe" list: payables@morrisonhershfield.com.

The individually identifiable and financial information on this form collected by Morrison Hershfield and its entities is used only for the purpose of payment of supplier invoices and will not be disclosed to anyone other than the claimant or his/her legal representative.

Definitions and instructions:

- For new enrollment, complete the EFT registration form and include a copy of a pre-printed voided cheque with the account holder name imprinted on the cheque and submit to vendors@morrisonhershfield.com
- For EFT Bank changes, please complete the EFT Registration form and include a copy of a pre-printed voided cheque with the account holder name imprinted on the cheque and submit to vendors@morrisonhershfield.com
- The enrollment form must be signed by an authorized signing officer
- EFT e-mail notifications are sent when an EFT payment has been issued
- For help on reconciling your electronic remittance please contact payables@morrisonhershfield.com

- All fields in the EFT Registration Form must be completed. These fields include:
 1. Company Name: (this must match the name imprinted on the voided cheque)
 2. Remittance Contact Name: this is the person in your Accounts Receivable department whom the remittance information is sent
 3. Remittance Email Address: provide an email address for the person who will receive any notifications of payment and remittance reports when payments have been issued.
 4. Contact phone number: provide the number of the person who can help resolve any issues encountered when EFT files are being transmitted.
 5. Banking information: as defined below
 - 6.*Authorized Signature: Print name, title and provide signature of an authorized signing officer on the bank accounts provided, as well as the authorization date.

- Void cheque: attach a void cheque to provide confirmation of Identification/account numbers
- Bank Name: official name of the financial institution
- Bank Address: Street address, City, Province, Postal Code associated with the branch of the financial institution
- Transit No.: the 5-digit number that identifies your financial institution's branch found on the bottom left edge of a cheque
- Institution No.: the 3-digit number that identifies a financial institution found on the bottom left edge of a cheque
- Account No.: the 7-12 digit number that uniquely identifies your bank account found on the bottom right edge of a cheque
- Effective date – the date on which the enrollment is submitted