



**Accounts Payable – Finance
Department**

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TOWN OF AJAX
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Ajax, ON L1S 2H9
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Accounts Payable Direct Deposit Form

Applications will be processed when the completed **ORIGINAL** document is signed in "ink" and received in this office. Applications that are faxed or emailed are not accepted. Mail a copy of a cancelled/voided cheque or pre-printed bank deposit slip along with your application

Step #1 Vendor Information

Type of Request: 1st Time Set-up Update of Information

Company Name: [Click here to enter text.](#)

Street Address: [Click here to enter text.](#)

Town: [Click here to enter text.](#)

Province: [Click here to enter text.](#)

Postal Code [Click here to enter text.](#)

Telephone #: [Click here to enter text.](#)

Email address: [Click here to enter text.](#)

Step #2 – Vendor Banking Information

Please attach a copy of a void cheque **or** a pre-printed bank deposit slip **or** a copy of bank statement **or** a cancelled cheque.

Note: If this is a change/update, please enter previous banking information above or provide copy of previous application

Bank Name: [Click here to enter text.](#)

Bank Address: [Click here to enter text.](#)

Bank #: [Click here to enter text.](#) Transit #: [Click here to enter text.](#) Account #: [Click here to enter text.](#)

Step #3 – Vendor Authorization

I hereby authorize The Town of Ajax to make deposits to my bank account. This authorization will remain in effect until cancelled or changed in writing or if account becomes inactive for 2 years.

Print Name: _____

Signature: _____

Date: [Click here to enter a date.](#)

Signature: _____

Date: [Click here to enter a date.](#)

The Town of Ajax will complete this section:

Vendor Number: [Click here to enter text.](#)

Approved by: _____

Statement of Collection of Personal Information

The information on this form is collected under authority of Section 8 of the Municipal Act, SO 2001, s.25 and will be used only for the purpose of providing direct deposit payments for the Town's vendors.