



Freedom of Information and Protection of Privacy Act (FOIPPA) - The personal information requested on this form is collected under the authority of the Financial Administration Act in compliance with the FOIPPA and will be used to process your Direct Deposit Application. The financial information contained below is protected under the provisions of the FOIPPA and will be used only for direct deposit by means of electronic funds transfer. For information about the collection use and disclosure practices write to the Director, Banking and Client Relations, Treasury Payments, Ministry of Finance, Provincial Treasury, PO Box 9414 Stn Prov Govt, Victoria, BC V8W 9V1.

See instructions on Page 2 before completing.

CHECK (✓) ONE: START DIRECT DEPOSIT CHANGE BANKING INFORMATION CANCEL DIRECT DEPOSIT

PART 1 - SUPPLIER INFORMATION

Form with fields: INDIVIDUAL LAST NAME, FIRST NAME, MIDDLE NAME, REGISTERED BUSINESS NAME/ CORPORATION NAME, SUPPLIER NUMBER (6 or 7 digits - if known), BUSINESS NUMBER (9 digits)

MAILING ADDRESS (include street or PO box, city, province and postal code)

Form with fields: IS THIS A CHANGE OF ADDRESS? (YES/NO), EMAIL ADDRESS (for delivery of an electronic payment remittance)

PART 2 - BANKING INFORMATION (Canadian Financial Institutions Only)

See Page 2 for additional instructions.

TRANSIT NO. (5 digits) | BANK NO. (3 digits) | BANK ACCOUNT NUMBER

Financial Institution Stamp (not required if void cheque or direct deposit form attached)

ACCOUNT HOLDER NAME(S) (if different from supplier name above)

BANK NAME

ADDRESS OF BANK (include street or PO box, city, province and postal code)

PART 3 - PROGRAM IDENTIFICATION

Check (✓) which payments you want direct deposited to the account specified above.

ALL PROVINCE OF BC PAYMENTS

ONLY PAYMENTS FROM (enter details below):

Table with columns: MINISTRY ISSUING THE PAYMENT, FILE NUMBER, PROGRAM DESCRIPTION

PART 4 - AUTHORIZATION

I/We, the undersigned are authorized to provide the above information on behalf of the corporation/individual(s) and further authorize the Province of BC to make payment by direct deposit into the above account until written notification to change or cancel is received.

Table with columns: SIGNATURE, FULL LEGAL NAME, TELEPHONE NUMBER (DAYTIME), DATE SIGNED

OFFICE USE ONLY

Change Banking Information Request(s): Account details have been verbally confirmed with a known contact. Contact information was not sourced from change request. CFO INITIAL - OR CFO ENDORSED DELEGATE INITIAL

Table with columns: GENERAL SUPPLIER NUMBER, SITE, MINISTRY NAME, MINISTRY CONTACT NAME, TELEPHONE NUMBER, MINISTRY CONTACT SIGNATURE, TREASURY PAYMENT SERVICES INFORMATION ADD DATE, INITIALS

COMMENTS:

INSTRUCTIONS FOR COMPLETING THE DIRECT DEPOSIT APPLICATION

General Information

- Complete this form if you want to start, change or cancel direct deposit payments from Community Living British Columbia (CLBC).
- Do not complete the form if you already receive electronic payments from another B.C. government ministry or organization.
- Allow 6 to 8 weeks to process your application.

Important

- If you are changing bank accounts, do not close your old bank account prior to confirming that the new direct deposit service information has been updated for CLBC payments. Closing the account prior to updating the account information may result in the payment being delayed.
- If the payment cannot be deposited to the banking information on file then a cheque will be issued and mailed to the address on file.

Part 1 - Supplier Information

- Complete Part 1 of this form with your supplier information listed in your CLBC contract or agreement.
- Do not enter the name(s) of bank account holder(s) that are not on the contract or agreement in this section.
- This supplier name must be indicated on all requests for payment and must match the name associated with the bank account.
- When adding your address to the form, please indicate whether or not this is a change of address.

Part 2 - Banking Information

- Direct deposit is only available for Canadian funds to Canadian financial institutions.
- Complete Part 2 of this form with your bank account information.
- Attach an original voided personalized cheque or other original supporting documentation from your financial institution that confirms your account information.
- If supporting documentation is not available, your bank can validate accuracy of the banking details and authenticity of supplier signature provided by stamping the application form with a branch domicile stamp and a bank representative signature (see IMPORTANT NOTE below).

IMPORTANT NOTE:

- P The name associated with the bank account must match Part 1 - Supplier Information. If you are requesting a joint bank account enter all names on the bank account and one of the names must match the supplier name listed in Part 1 - Supplier information section.
- P If the CLBC contract or agreement is "In Trust" the bank account name must match exactly as per your contract or agreement. The supporting documentation that confirms your bank account information must be a void cheque or pre-authorized direct deposit form listing the full name of the bank account and completed by your financial institution. An application form with only a branch domicile stamp and a bank representative signature will not be accepted.

The diagram shows a voided cheque with the following fields and values:

- Name: [Redacted]
- P.O. Box: [Redacted]
- City, Canada: H0H 0H0
- Cheque No.: 000000
- Pay to the order of: [Redacted]
- Dollars: [Redacted]
- Signature: [Redacted]

The cheque is marked "Void" with a large diagonal line. Below the cheque, the MICR line is shown with four segments labeled 1, 2, 3, and 4.

1 2 3 4

1. Cheque number – not required
2. Transit (branch) number – 5 digits
3. Bank (institution) number – 3 digits
4. Bank account number – as shown on your cheque

Part 3 – Program Identification

- Supplier banking information can be used for CLBC payments only or all other BC Government ministry programs for payment.

Part 4 - Authorization

- Application form must be signed by all parties listed in Part 1 - Supplier information.

Sending in Your Application

- To avoid delays in processing, drop off or mail a hard copy of your original completed application form to [your local CLBC Office](#).
- Electronic copies, faxes or photocopies of this form or supporting documentation will not be accepted.