Electronic Payment Authorization
Instructions

To receive your payments via automatic deposit from the State of New Jersey, complete and return the attached form with a **voided check or bank letter**. This letter must include ABA number (routing or transit number), bank account number, and type of account (checking or savings). For additional information, call 609-292-1865.

PLEASE PRINT ALL ENTRIES (except for signature[s]).

1. **Name:** Enter the payee (vendor, employee, etc.) receiving the automatic deposit transaction. Name must not exceed 30 positions including spaces and punctuation marks. Abbreviate as required to stay within the 30 position limit. (State employees – your name).

2. **Bank Name:** Enter the name of depository bank/financial institution receiving ACH credit.

3. **Account Type:** Check appropriate box.

4. **Authorized Agents' Date, Signatures & Title:** A minimum of two signatures is required when payment will be made to a corporation, partnership, or joint account. For a vendor, the "Agent" signature must include an office manager, supervisor, or individual responsible for the depository process. Only one signature is required for Sole Proprietors or State of New Jersey employees.

5. **Telephone No(s).:** Enter telephone number, including area code.

6. **Vendor No:** Enter the nine-digit vendor number assigned by the State of New Jersey. (This often equals an employee ID number for State employees, social security number for non-State employees, and Federal ID number for vendors.) Leave the two position field following the vendor number blank.

7. **Bank Transit/ABA No.:** Enter bank's nine-digit American Banking Association Number. This number is also known as the bank transit or routing number.

8. **Account No.:** Enter checking/savings account number. This is a variable length field; the size is dependent on the receiving bank's account structure.

NOTES:

- When a change is made to the payees' ABA and/or account number, the payee is required to notify the State as soon as possible to allow time for the preparation of a new authorization form and to allow for the pre-notification of the changes to the State's disbursing bank.

- Details regarding specific ACH payments, similar to a check stub, may be obtained over the internet through the Vendor Payment Inquiry (VPI) system. VPI also provides two years of historical data and allows for the review of scheduled payments. To obtain an authentication code to access VPI contact John.Wiacek@treas.state.nj.us.

Form Distribution: Completed form along with the required voided check or bank letter should be mailed or faxed to:

Department of the Treasury, Office of Management and Budget, PO Box 221, 6TH Floor - Room 674, Trenton, N.J. 08625-0221
Fax: (609)-984-5210

Electronic Payment Authorization
For Automatic Deposits (ACH Credits)
New Jersey Department of the Treasury

I (we) hereby authorize the New Jersey Department of the Treasury to initiate CREDIT entries to the bank account and deposit bank named below. This authority is to remain in full force and effect until the Department of the Treasury has received written notification of any changes, and in such manner as to afford the Department of the Treasury a reasonable opportunity to act.

Action Requested:

☐ Establish new ACH (first time users)

☐ Change/Update bank information

☐ Establish new location code (indicate type i.e. cafeteria plan, EDRS, etc.): _____

NAME: _____

BANK NAME: _____ (30 positions max)

ACCOUNT TYPE: ( ) Savings ( ) Checking (please check one)

AUTHORIZED AGENT: (a minimum of two signatures unless individual or sole proprietor)

Date: ___/___/___ Signed: _____ Title: _____

Date: ___/___/___ Signed: _____ Title: _____

Telephone Number (___) _____ Telephone Number (___) _____

Please attach a voided check or bank letter to the form in confirmation of the above account.

Enter the specified three numbers below:

Vendor Number

Bank Transit Number

Account Number

☐ Enter "X" if the financial institution receiving your payment is a foreign bank or is acting as an agent for a foreign bank on your behalf.

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