

Application for Direct Deposit

INSTRUCTIONS

- Complete Section A.
- Attach to Section B a blank personalized cheque/deposit slip with "VOID" written on it or have Section B completed by your financial institution if you do not attach a voided personalized cheque/deposit slip (please ensure the bank official signs and dates Section B where indicated).
- **FOR ALL FOREIGN ACCOUNTS, THE BANK OFFICIAL MUST COMPLETE SECTION B.**
- Sign and date Section C. The original signed form must be sent to the Accountant.

Section "A" - Client Identification

- **Please print clearly**

Last Name	First Name	Middle Initial
Address (Street Number and Name/Apartment Number)		
City/Town	Province	Country
Postal Code	Home Telephone Number (Including Area Code)	

Section "B" - Banking Information

- **Funds cannot be deposited into a joint account**

Branch Number	Institution Number	Account Number
Bank Identifier Code (BIC)	Int'l Bank Account Number (IBAN)	Account Type <input type="checkbox"/> Savings <input type="checkbox"/> Chequing <input type="checkbox"/> Other
Name and Address of Financial Institution (E.G. BANK STAMP)		
Bank Official's Signature and Position (PRINT NAME AND TITLE)		Date

Section "C" - Client Authorization

I authorize direct deposit of my trust funds into the above-designated account and agree to pay all applicable bank service charges.

Client Signature

Date

Beneficiary Name

Beneficiary Account Number
