CITY OF TUCSON
HOUSING VENDOR
ACH/EFT APPLICATION

RESET

SECTION A: TO BE COMPLETED BY SUBMITTING VENDOR - INSTRUCTIONS ON REVERSE SIDE

DESCRIPTION
☐ NEW ☐ CHANGE ☐ CANCEL

TAXPAYER ID TYPE (CHECK ONE) ☐ 1= FEIN ☐ 2 = SSN	TAXPAYER ID NUMBER	VENDOR NUMBER
VENDOR/PAYEE NAME	LEGAL NAME OF ENTITY OR INDIVIDUAL	
VENDOR ADDRESS		TELEPHONE NUMBER WITH AREA CODE
CITY	STATE	ZIP CODE
E-MAIL ADDRESS		
VENDOR CONTACT NAME 1:	PHONE NUMBER	FAX NUMBER
VENDOR CONTACT NAME 2:	PHONE NUMBER	FAX NUMBER

SECTION B: TO BE COMPLETED BY SUBMITTING VENDOR

FINANCIAL INSTITUTION NAME	IF CHANGE PLEASE INDICATE PREVIOUS FINANCIAL INSTITUTION NAME	
FINANCIAL INSTITUTION ADDRESS		FINANCIAL INSTITUTION TELEPHONE NUMBER
CITY	STATE	ZIP CODE
DEPOSITOR ABA ROUTING NUMBER	IF CHANGE PLEASE INDICATE PREVIOUS ABA ROUTING NUMBER	
DEPOSITOR ACCOUNT NUMBER	IF CHANGE PLEASE INDICATE PREVIOUS ACCOUNT NUMBER	

DEPOSITOR ACCOUNT TYPE (CHECK ONE) ☐ SAVINGS ☐ CHECKING

INCLUDED WITH APPLICATION (CHECK ONE) ☐ VOIDED CHECK ☐ BANK LETTER

SECTION C: VENDOR AUTHORIZATION

☐ I hereby authorize the City of Tucson, Finance Department and the above named financial institution to initiate electronic funds transfers (EFT) into the savings/checking account listed above.

☐ I hereby cancel my ACH/EFT authorization.

AUTHORIZED VENDOR/REPRESENTATIVE (Signature)	DATE

SECTION D: VENDOR PAYMENT LOCATION

Vendor payment information may be viewed by going to www.tucsonaz.gov/vendorpay. You must have your City of Tucson vendor number to access payment information.

SECTION E: MAILING INSTRUCTIONS

Three ways to return completed form:

Mail to: Community Services Department, Section 8 Division, PO Box 27210, Tucson, AZ 85726-7210
Fax to: (520) 791-2511, ATTN: Section 8 Division
Email to: Sec8_Landlords@tucsonaz.gov

The EFT authorization process may take 6-8 weeks before deposits begin. Please see reverse side for details.

SECTION F: ACCOUNTING USE ONLY

AUTHORIZED SIGNATURE FOR EFT SET UP:_____DATE: _____

EFT ACTIVATION DATE: _____

BANK TEST DATE: _____

HOUSING VENDOR ACH/EFT APPLICATION INSTRUCTIONS

Fill in the appropriate boxes as described below

SECTION A: TO BE COMPLETED BY SUBMITTING VENDOR

DESCRIPTION
Check the appropriate box for this submission

TAXPAYER ID TYPE
Check 1 if your taxpayer ID is a Federal Employers Identification number (FEIN) or 2 if your taxpayer ID is a Social Security Number (SSN)

TAXPAYER ID NUMBER
Enter the FEIN or SSN associated with the legal name of the entity or individual

VENDOR NUMBER
If known, enter the vendor number assigned to your business by the City of Tucson

VENDOR NAME
Enter the name of the entity or individual:
Individual - Enter your name (Last Name, First Name and Middle Initial)
Sole Proprietor - Enter name of Business
Corporation - Enter your Doing Business As (DBA) name
Other - Enter your entity's name

LEGAL ENTITY NAME
Enter Legal Name of Entity or Individual as filed with IRS:
Individual - Enter your name (Last Name, First Name and Middle Initial)
Sole Proprietor - Enter owner's name (Last Name, First Name and Middle Initial)
Corporation - Enter your name as it appears on the charter or other legal documentation as filed with the IRS
Other - Enter your entity's name as filed with the IRS

ADDRESS
Enter your mailing address

TELEPHONE NUMBER
Enter your telephone number with area code

CITY, STATE, ZIP CODE
Enter your city, state and zip code for the mailing address

SECTION B: TO BE COMPLETED BY SUBMITTING VENDOR

FINANCIAL INSTITUTION NAME, ADDRESS, CITY, STATE, ZIP CODE, PHONE NUMBER
Enter information provided by your bank
NOTE: If this is a request for a "CHANGE" please provide your previous financial institution name in the space provided

DEPOSITOR ABA ROUTING NUMBER
Enter your financial institution's routing number
NOTE: If this is a request for a "CHANGE" please provide your previous routing number in the space provided

DEPOSITOR ACCOUNT NUMBER
Enter your account number
NOTE: If this is a request for a "CHANGE" please provide your previous account number in the space provided

DEPOSITOR ACCOUNT TYPE
Please select type of account (savings or checking)

SUPPORTING DOCUMENTATION
Voided check or bank letter is required to be attached with your application

SECTION C: VENDOR AUTHORIZATION

VENDOR AUTHORIZATION
Must be signed by the vendor or an authorized representative before application can be processed.

SECTION D: VENDOR PAYMENT LOCATION

Vendor Payment information may be viewed by going to www.tucsonaz.gov/vendorpay. You must have your City of Tucson vendor number to access payment information.

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GENERAL INSTRUCTIONS

If all the necessary sections on this form are not completed, the application will not be processed.

ACH transactions will be effective approximately 6-8 weeks after the application is approved.

Changing Financial Institution or Depositor Account (within the same Financial Institution)
All deposits will continue to be deposited into your present account, unless notification of the change by submission of a new application with the "CHANGE" box checked at the top of the form is received. Current banking information must be included.