

# DIRECT DEPOSIT ENROLLMENT FORM

Print clearly and in block letters.

## INSTRUCTIONS

This form must be signed by the employee in order to authorize direct payroll deposit to a financial institution located in Canada. Validation requires that one of the following items be provided with the completed form.

1. Void Cheque
2. Direct Deposit document/verification Financial Institution confirming the account information.

The completed form should be scanned and submitted to the payroll general inbox ([payroll@vancouver.ca](mailto:payroll@vancouver.ca)) for processing. Documents sent from an email account other than a City of Vancouver email address may require additional confirmation.

## PART A All Fields are Mandatory

Last Name	<input type="text"/>		
First Name	<input type="text"/>		
Hire Date	<input type="text"/>	Employee No.	<input type="text"/>
Address	<input type="text"/>		
	<input type="text"/>	Prov.	<input type="text"/>
Unit #/PO Box	<input type="text"/>	Postal Code	<input type="text"/>
Telephone	<input type="text"/>	Cell Phone	<input type="text"/>

## PART B BANKING INFORMATION - All Fields are Mandatory

Void cheque attached  Financial Institution verification attached

### **\*\* IMPORTANT NOTE FOR NEW HIRES:**

***Due to the timing of payroll cut off and the receipt of documents by the payroll department, new hires may receive their first payroll payment via a cheque which will be mailed to the home address.***

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**FINANCIAL INSTITUTION – Deposit information will show on pay statement.**

Branch / Transit No.  Institution / Bank No.

Account No.

**How to complete Part B \*\* See Example below**

Cheque number - not required.

**1. Cheque Number**

**DO NOT USE**

**2. Branch /Transit number:**

- 5 digits.

**3. Institution /Bank number:**

- 3 digits.

**4. Account number:**

- as shown on your cheque.

**How to complete Part B \*\* See Example below**

Cheque number - not required.

1. Branch/Transit number - 5 digits.
2. Institution /Banknumber - 3 digits.
3. Account number - as shown on your cheque.

**Example / Exemple**

Name / Nom: \_\_\_\_\_ P.O. Box / C.P. 000: \_\_\_\_\_ City / Ville, Canada H0H 0H0: \_\_\_\_\_

Cheque No. 0000000  
N° de chèque

Pay to the order of / Payez à l'ordre de: \_\_\_\_\_ \$ \_\_\_\_\_ Dollars

Signature: \_\_\_\_\_

"Void"  
«Null»

⑆ 9999 ⑆ ⑆ 999999 ⑆ 9999 ⑆ 999 ⑆ 9999 ⑆ 9 ⑆

1                      2                      3                      4

***When changing financial institutions or accounts, allow sufficient time to ensure the re-direction of payroll funds to the new account.***

**PART C Authorization**

I, authorize payroll deposits directly to the account specified in Part “B” until further notice.

Date (YYYY-MM-DD)

Signature

<b>Office Use Only</b>	<b>Processed By</b>	<b>Date:</b>	<b>For Pay Period:</b>
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