

Vendor Update Authorization Form Instructions

(Banking/Address Change Updates)

Instructions:

1. Fill in the Date field
2. Select the reason for update:
 - **New:** Brand new EFT and/or Vendor setup
 - **Change:** to change existing information on file (e.g., address, email, banking info)
 - **Cancel:** to notify the City of Fresno that vendor wishes to cancel EFT payment election.
3. Fill out Section 1 (Payee Information)
 - Provide Individual or Company Name (check the SS # or EIN checkbox)
 - Include "Doing business as" name, if applicable
 - Provide Remittance Address (where payments should be mailed to)
 - Provide Primary & Secondary contact information
4. Fill out Section 2 (Current Banking Information on file for EFT)
 - Only fill out this section if you want to change existing banking information to a new bank account.
5. Fill out Section 3 (New Banking Information for EFT)
 - For any EFT changes (from existing to new or new EFT set-ups), mail the completed form & a copy of a physical voided check, to the address listed at the bottom of these instructions.
6. Fill out Section 4 (EFT Authorization)
 - Check the appropriate box under EFT Authorization section if a change to banking information is made
7. Provide signature, full name (print), and Position Title
8. Please attach a copy of your most recent W9 when submitting completed forms. This is a mandatory requirement, and the city cannot move forward without it. Some additional context:
 - If your federal tax classification is Sole Proprietor/Individual, you must provide a SSN #
 - If your federal tax classification is LLC, you must indicate which type
 - The W9 must be signed and dated to be considered complete

Where to send a completed form:

- If setting up EFT for the first time OR updating existing banking information, please **mail** an unsigned physical voided check, the completed form, and the W9 to the following address:
City of Fresno
Attn: Purchasing Division
2101 G Street, Bldg. A
Fresno, CA 93706
- If updating remit address or email, please send completed form & W9 to:
VendorManagement@fresno.gov

All updates will be verified by the Purchasing Division upon receipt



CITY OF FRESNO
VENDOR UPDATE AUTHORIZATION FORM

DATE _____

New [] Change [] Cancel []

Section 1: Payee Information

Social Security # OR EIN

Individual: _____
NAME (Last, First, Middle)

OR:

Company: _____
NAME (DBA, if applicable)

City of Fresno Business License #, if applicable***

Payment Remit Address: _____
No. Street City State Zip

Primary Contact: _____ Secondary Contact: _____
NAME and TITLE NAME and TITLE

Email Address: _____ Phone: _____ Email Address: _____ Phone: _____

Section 2: Current Banking Information on file for EFT (Required for Changes to Banking Information)

Financial Institution: _____

Address: _____
No. Street City State Zip

Account Number: _____ Routing #: _____

Section 3: New Banking Information for EFT*

Financial Institution: _____

Address: _____
No. Street City State Zip

Account Number: _____ Routing #: _____

Reason for the change request: _____

*Attach a PHYSICAL VOIDED CHECK (Do not sign the check)

- For any Banking Information updates please mail this form along with a physical voided check to address listed on the instructions page (Pg. 1)
For address and email updates please email form to: VendorManagement@fresno.gov

This authorization will remain in effect until canceled in writing. A new authorization form must be completed if you close this bank account or if you wish to designate a different bank account to receive the funds. Failure to notify the City of Fresno of a closed account will cause a delay in receiving your payments.

- An EFT remittance (equivalent to a check stub) will be sent via e-mail to the email address provided in Section 1.

***A valid City of Fresno Business License is required, if applicable, to comply with the Fresno Municipal Code. All license requirements must be current and are subject to verification by the City's Business Tax Department.

Section 4: Authorizations

I hereby authorize: (Check the appropriate selections)

- The City of Fresno to deposit payments via Electronic Funds Transfer to the named financial institution and bank account number provided above.
The City of Fresno to cancel my EFT payment election.
The City of Fresno to mail checks.

Signature: _____

Please print name: _____

Title: _____