



# City of Coquitlam Vendor Profile & Electronic Funds Transfer (EFT) Application

**Accounts Payable Division**  
3000 Guildford Way, Coquitlam BC V3B 7N2  
Phone: 604-927-3040 Fax: 604-927-3035

Please email completed form to [apinvoices@coquitlam.ca](mailto:apinvoices@coquitlam.ca)

## Applicant Information

Legal Company Name: \_\_\_\_\_

Payable to: \_\_\_\_\_  
(If different from legal company name above.)

Mailing Address: \_\_\_\_\_

Remittance Address: \_\_\_\_\_  
(If different from mailing address above.)

Contact Name & Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

GST Registration #: \_\_\_\_\_ WorkSafeBC Account #: \_\_\_\_\_

Please indicate payment preference:  Cheque  Electronic Funds Transfer (EFT) – Complete section below  
Canadian banking institutions only

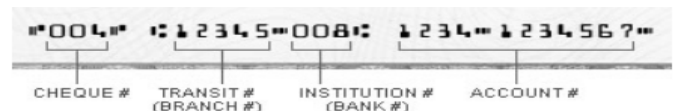
## EFT Payment Information (for assistance, please contact the City's Accounts Payable Division at 604 927 3040)

**Please attach a VOID cheque with this form.**

Name of Financial Institution: \_\_\_\_\_

Branch Address: \_\_\_\_\_

Name on Bank Account: \_\_\_\_\_



Transit # (5 digits) \_\_\_\_\_ Institution # (3 digits) \_\_\_\_\_ Account # \_\_\_\_\_

EFT Remittance Advice Email Address: \_\_\_\_\_

**Disclaimer:** I understand that I am responsible for ensuring the information provided is correct and current. I will not hold the City of Coquitlam responsible for lost or delayed payments where changes to the banking information have been made and not communicated to the City of Coquitlam in a timely manner. I hereby authorize the City of Coquitlam to process direct deposits to the account provided above. The information is obtained in accordance with the *Freedom of Information and Protection of Privacy Act* for the purpose of payment to the Vendor. Should you have any questions, please contact Accounting & Financial Reporting Manager at 604-927-3036 or [apinvoices@coquitlam.ca](mailto:apinvoices@coquitlam.ca).

Authorized Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Invoice Requirements:** Please send one PDF invoice per email to [apinvoices@coquitlam.ca](mailto:apinvoices@coquitlam.ca).

Invoices are to include: Purchase Order Number, Purchase Contract, or Work Order Number, and City Contact name.