

Department of Finance

Orange County Department of Finance 255 Main St. Goshen, NY 10924 Phone: 845-360-6666 Authorization is (select one):

□ New

□ Change

Opt out of ACH Payment

AUTHORIZATION FORM ELECTRONIC FUNDS TRANSFER (EFT) & AUTOMATED CLEARING HOUSE (ACH)

Dear Vendor:

We are now able to offer you a choice between ACH or check for payment when doing business with Orange County. If you would like to continue receiving a check you do not need to do anything and can disregard this letter. If you would like to start receiving payments by ACH, please provide the information below. Once your letter is completed, please return it to our office.

Supplier/Vendor Name:	Contact Name:
Address Line 1:	
Address Line 2:	Fax: ()
Address Line 3:	Last 4 digits of Tax ID/SSN:
City: State: Zip Code:	-
I hereby authorize ORANGE COUNTY to initiate credit entries, and to for any credit entries in error to my (select one): Checking Account depository bank named below to credit and/or debit the same to my acc	Savings Account indicated below and the
Bank Name:	-
Routing/ABA Number:	-
Account Number:	-
One of the following is required in order for this request to be processed	d (check one):
□ Voided Check □ Bank Letter of	or Specification Sheet
(no starter checks) (the signature	of your local bank representative MUST be included)
A detail of the invoice(s) being paid will be emailed. Please provide at	least one (1) valid email address:
Email #1:	
Email #2:	
Authorized Signature:	Date:
It may take one to two payment cycles before you will receive your firs	t payment by ACH. If you have any questions,

please contact our office.

Sincerely, Karin E. Hablow Commissioner of Finance