

City of Albemarle
Finance Department
Purchasing
144 North Second Street, Albemarle, NC 28001
P O Box 190, Albemarle, NC 28002-0190
704-984-9444 | 704-984-9448 Fax
CoA-PurchaseOrders@ci.albemarle.nc.us

VENDOR
AUTHORIZATION FOR ELECTRONIC FUNDS TRANSFER

Though optional, we encourage you to sign up for this service, which is safer and faster than traditional mail.

Please Check One: Initial Enrollment Change

Name/Company _____
Address _____
City, State Zip _____
Social Security or Federal ID # _____
Email Address **(Required)** _____
Telephone Number _____

Electronic Funds Transfer (EFT) Information:

Name of Bank _____ Account Type Checking Savings
Address of Bank _____
ABA Routing Number _____ Account Number _____

By signing below, I hereby authorize the City of Albemarle to electronically deposit funds into the account above. I understand if my banking information changes and the City of Albemarle is not made aware of the change, payment could be delayed.

Signature _____ Date _____

Email to CoA-PurchaseOrders@ci.albemarle.nc.us

Fax to 704-984-9448

Mail to City of Albemarle
Finance Department
Purchasing
P O Box 190
Albemarle NC 28002-0190

Office Use Only:

- Verified by: _____ Date: _____ Time: _____
Talked with: _____ Title: _____ Telephone #: _____
- Vendor # _____ Bank Code _____ Date _____ Initials _____