

Facility License #: _____



4901 Waters Edge Drive, Suite 101, Raleigh, NC 27606
 Phone: (919) 851-9550 Web: www.wakesmartstart.org

ACH AUTHORIZATION FORM

Place an (X) in the box beside the Request Type: New Account Set-Up <input type="checkbox"/> Account Change <input type="checkbox"/> *			
*Any account changes must be received at least 30 days prior to disbursement in order to take effect.			
Complete and print this form and attach an <u>ORIGINAL VOIDED CHECK</u> or a letter from your bank verifying the bank's routing number and your bank account number. Mail to: Wake County Smart Start, Attention: Accounts Payable, 4901 Waters Edge Drive, Suite 101, Raleigh, NC 27606. <i>Note: No faxed copies of this form or faxed copies of voided checks will be accepted. No counter checks or deposit slips will be accepted.</i>			
Participating Entity Information			
Entity Name:			
Entity Address:			
Tax ID Number:			
Financial Institution Account Information			
Institution Name:			
Institution Address:			
Transit / Routing #:			
Bank Account #:			
Type of Account: (check one)	<input type="checkbox"/> Checking	<input type="checkbox"/> Savings	
Participating Entity Authorization			
I, on behalf of the participating entity indicated above, hereby authorize Wake County Smart Start, Inc. (WCSS) to initiate ACH credit entries to the above designated bank account for payments due from WCSS, pursuant to the Established Policies and Procedures For WCSS EFT Payments System. I (we) also authorize any necessary ACH debit entries or adjustments for any ACH credit entries made in error to the account. I (we) acknowledge the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law and provisions of the National Automated Clearing House Association (NACHA) Operating Rules. The authority will remain in effect until we have cancelled it in writing.			
Authorized Signer's Name (print):		Tel:	
Signature:		Date:	
Email Address for Payment Notification			
<i>Mail completed form and an original, VOIDED check or letter from bank to:</i> Wake County Smart Start Attn: Accounts Payable 4901 Waters Edge Dr., Suite 101 Raleigh, NC 27606		WCSS Use Only: Updated by: _____ Date: _____ Approved by: _____ Date: _____	