

Vendor Direct Deposit / Advance Payment Notification Authorization

This form may be used by vendors or individual recipients
 - to receive payments from the state of Texas by direct deposit
 - to change or cancel existing direct deposit information

For Comptroller's Use Only		

For UT Arlington Use		
<input type="checkbox"/>	Advance Payment Notification	
<input type="checkbox"/>	International Payments Verification	
<input type="checkbox"/>	Interagency Transfer	

Transaction Type

SECTION 1	<input type="checkbox"/> New setup (Sections 2, 3, 4 and 5 - Section 6 is optional)	<input type="checkbox"/> Change account type (Sections 2, 3, 4 and 5 - Section 6 is optional)
	<input type="checkbox"/> Change financial institution (Sections 2, 3, 4 and 5 - Section 6 is optional)	<input type="checkbox"/> Cancellation (Sections 2 and 4 - Sections 7 and 8 for state agency use)
	<input type="checkbox"/> Change account number (Sections 2, 3, 4 and 5 - Section 6 is optional)	

Payee Identification

SECTION 2	Social Security Number (SSN) or Employer Identification Number (EIN) _____		Mail code (If not known, leave blank.) _____	
	Payee name (Business/Individual) _____		Phone number () _____ ext. _____	
	Mailing address _____	City _____	State _____	ZIP code _____

Financial Institution (Completion by financial institution is recommended.)

SECTION 3	Financial institution name _____		City _____	State _____
	Routing transit number (9 digits) _____		Customer account number (maximum 17 characters) _____	
	Financial representative name (optional) _____		Title (optional) _____	
	Financial representative signature (optional) _____		Phone number (optional) () _____ ext. _____	Date (optional) _____

Authorization for Setup, Changes or Cancellation (required)

SECTION 4	I authorize The University of Texas at Arlington to deposit my payments from the state of Texas to my financial institution electronically. I understand that The University of Texas at Arlington will reverse any payments made to my account in error.		
	I further understand that The University of Texas at Arlington will comply at all times with the National Automated Clearing House Association's rules. (For further information on these rules, please contact your financial institution.)		
	Authorized signature sign here ▶	Printed name	Date

Authorization for Advance Payment Notification Setup (optional)

SECTION 5	I authorize The University of Texas at Arlington to send an e-mail notification of payment with settlement to my account within two days. I understand that notifications may include payment information that is considered confidential and therefore exempt from public disclosure.	
	Contact name (Please print) _____	Contact phone number () _____ ext. _____
	E-mail address _____	

Cancellation by Agency (for state agency use)

SEC 6	Reason _____	Date _____
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Authorized Signature (for state agency use)

SECTION 7	Signature sign here ▶	Date _____
	Phone number () _____ ext. _____	Agency number _____
	Agency name _____	
	Comments _____	

Please return your completed form to:
 The University of Texas at Arlington
 Accounts Payable/Direct Deposit Program
 Box 19135
 Arlington, TX 76019-0135
 E-mail: accounts_payable@uta.edu
 FAX: (817) 272-2685 Phone: (817) 272-2194

Instructions for Vendor Direct Deposit / Advance Payment Notification Authorization

Under Ch. 559, Government Code, you are entitled to review, request and correct information we have on file about you, with limited exception in accordance with Ch. 552, Government Code. To request information for review or to request error correction, contact us at (800) 531-5441, ext. 6-6057.

Section 1: Select the appropriate transaction type(s).

Section 2: Provide the Social Security Number or Employer Identification Number (EIN).

Section 3: Completion by financial institution is recommended.

Important: Your direct deposit account information may be different from the account information printed on your checks. It is recommended that you contact your financial institution to confirm your direct deposit account information.

Note: A prenote test will be sent to your financial institution for the account information entered into The University of Texas at Arlington system. The prenote test is for a period of six banking days, and it is sent to your financial institution to verify your account information. If no further action is required by your financial institution, your direct deposit instructions will become effective when the six banking day prenote time frame has expired.

Section 4: Must be completed in its entirety, and no alterations to the authorization language will be accepted.

Section 5: Provide the contact name, phone number and e-mail address to which payment notifications are to be sent. Notifications are sent for direct deposit payments only, and e-mails are sent one business day prior to the deposit.