



SUPPLIER SET UP/ CHANGE OF INFORMATION

410 Esplanade, PO Box 220
 Ladysmith, BC V9G 1A2
 Phone: 250.245.6400
 Fax: 250.245.6411
 email: ap@ladysmith.ca

Add a New Supplier

Add / Change Banking Information

Update Address / Contact Information

COMPANY INFORMATION:

Name:	
Street Address:	PO Box:
City:	Prov/State:
Postal / Zip Code:	Country:
Phone No.:	Worksafe BC Account #:
E-mail: (for EFT payment notification purposes)	Do you have a Town of Ladysmith Business Licence? <input type="checkbox"/> Yes <input type="checkbox"/> No

4. PREFERRED METHOD OF PAYMENT

Mail Cheque <input type="checkbox"/>	Electronic Funds Transfer (EFT) <input type="checkbox"/>
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To request participation in our EFT program, complete the section below, signed by your company's designated signing officer, and submit (original, photocopy, scan, or fax) a void cheque or correspondence from your financial institution with your banking information.

Payments are automatically and securely deposited to your company's designated bank account. An automated e-mail remittance advice will be sent to you as notification of any payment deposited in your bank account.

BANKING INFORMATION

Bank Name:		
Address:	City:	
Prov/State:	Postal / Zip Code:	
Bank Code :	Branch Code:	Account Number:

AUTHORIZATION

It is the responsibility of the Supplier to notify the Town of Ladysmith should any of the supplier information change. I certify that the information provided above is true, accurate and complete.

Signature:	Print Name:
Date:	Title:

Submit completed form by email: ap@ladysmith.ca or Fax: 250.245.6411 - Attention: ACCOUNTS PAYABLE