



CITY OF NEW CARROLLTON

January 29, 2019

In lieu of receiving a check in payment for goods and/or services provided to the City of New Carrollton, payment will be sent via electronic transfer and automatically credited to your account at your financial institution. This method of payment is called automated clearing house (“ACH”) payment. The **ACH Payment** program has proven to be an efficient and cost effective mechanism for making payments, increasing payment security and eliminating the 2 to 3 day mail time. In addition, funds are credited and available to the recipient *on the payment due date* without the need for making a manual deposit. You are required to invoice the City as usual; however, once the invoice is approved and processed for payment, an electronic remittance advice is sent by electronic mail to your company. The remittance advice would include statement-type information such as invoice numbers, invoice date and amount of the invoice paid.

Benefits to your company include:

- Cost savings.
- Elimination of check processing costs and collection costs associated with lost or misplaced checks.
- A more efficient back-end reconciliation.
- No restrictions on the minimum dollar amount of the payments transmitted through the ACH network, or the number of invoices each vendor can receive payment for on each ACH transmittal.
- Going green! Paperless, electronic payments are more secure, save money and also help conserve the environment by eliminating printing and mailing paper checks

The information requested on the ACH Vendor Enrollment Form is necessary to establish accurate electronic records for ACH payments and enables the City to make timely, accurate transfers to your financial institution.

Adhering to the following instructions will ensure successful implementation of your company’s payments via ACH:

- To receive payment electronically from the City of New Carrollton, please complete the PAYEE/COMPANY Information section of the ACH enrollment form. The form is included with this letter or can be accessed and downloaded from the Finance section of the City’s web site at www.newcarrolltonmd.gov
- In order to update our files the City will need a new W-9 completed and remitted with the ACH enrollment documentation.

- After completing the PAYEE/COMPANY information section, please take the enrollment form to the ACH/EFT Coordinator of your financial institution for completion of the FINANCIAL INSTITUTION Information section. The completed enrollment form will ensure that your financial institution is prepared to accept ACH/EFT payments from the City of New Carrollton.

After completing the PAYEE/COMPANY Information section and the FINANCIAL INSTITUTION Information section of the form, the signed form should either be emailed to finance@newcarrolltonmd.gov or mailed to the following address:

**CITY OF NEW CARROLLTON
ACCOUNTS PAYABLE
6016 PRINCESS GARDEN PARKWAY
NEW CARROLLTON, MD 20784**

IMPORTANT

1. Be sure the ACH enrollment form is *signed by the proper Payee/Company official and Financial Institution official*. Please include their title along with their signature.
2. The business Taxpayer Identification Number (TIN) is required. If the form is being completed for a company, the IRS assigned Employee Identification Number (EIN) should be entered as the TIN. If the form is being completed for a sole proprietor, the Social Security Number (SSN) should be entered as the TIN.
3. Please include a telephone contact number and email address.

If you want to have payments for different locations routed to different bank accounts, you will need to file a separate enrollment form for each account.

Please contact me at finance@newcarrolltonmd.gov if you have any questions about this process. We appreciate your business and look forward to providing your company with this more efficient payment options.

Sincerely,



Maisha Williams
Director of Finance and Accounting
City of New Carrollton



CITY OF NEW CARROLLTON

ACH Payment Enrollment Form

(please print)

PAYEE/COMPANY INFORMATION

Vendor Account Name:		TIN or SSN (required):	
Current Mailing Address:			
City		State:	Zip Code:
Contact Person Name:		Title:	
Contact Number:		Email Address:	

FINANCIAL INSTITUTION INFORMATION

Financial Institution Name:		
Address:		
City	State:	Zip Code:
Nine-Digit Routing Transit Number:		Account Number:
Account Type: ___ Checking ___ Savings		Name of Payee or Authorized Official: (please print)
Signature and Title of Payee or Authorized Official:		Date:

I hereby authorize the City of New Carrollton to initiate ACH transactions. I also authorize the City of New Carrollton and TD Bank to initiate (if necessary) debit entries or adjustments of any credit entries in error to my account indicated above.

This authority is to remain in full force and effect until the City of New Carrollton has received **written notification from me of its termination** in such manner as to afford the City of New Carrollton reasonable opportunity to act on it.

If you make changes to your bank account please **send an updated or cancelation ACH payment enrollment form to finance@newcarrolltonmd.gov**. Failure to do so may result in deposit failure.

FOR ACCOUNTS PAYABLE USE ONLY:

Date Request Received _____

Date Request Processed _____ By: _____

Substitute
Form W-9

Request for Taxpayer
Identification Number and Certification

Give form to requestor.
Do NOT send to the IRS.

Part 1 Taxpayer Information

IRS Reporting Name (Must match IRS record—this name must match the
Taxpayer Identification Number below)

Business Name, if different from above. (Doing Business As)

Exemptions:

Exempt payee code (if any) _____
Exemption from FACTA reporting code
(if any) _____

Check C Corporation S Corporation Individual/Sole Proprietor Not for Profit Partnership
Appropriate Government Estate
Box (es):

LLC If LLC Chose tax classification (required): C Corp S Corp Partnership Individual/Sole Proprietor

Address (Number, street and apt or suite number)

Area code and phone number

Fax Number

City, State, and Zip code

Email address

Web address

Part II Taxpayer Identification Number (TIN)

Enter your TIN in the box provided. For individuals this is your Social Security Number (SSN).
For resident aliens however, see page 2 of the IRS for W-9. For other entities it is your
employer identification number (EIN). If you do not have a number, see **"How to get a TIN"**
on page 2 of the IRS form W-9. <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

Taxpayer Identification Number

Part III Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number or I am waiting for the number to be issued.
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends or (c) the IRS had notified me that I am no longer subject to backup withholding.

Certification Instructions: You must cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest or dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRS), and generally, payments other than interest or dividends, you are not required to sign the Certification but you must provide your correct TIN.

Sign _____
Here Signature

Date _____

Print Name _____

Any questions regarding this form please email: ncvendor@newcarrolltonmd.gov