

## Grants and Contributions Direct Deposit Request Form

### Action Requested

- Direct Deposit Registration / Renewal ☐
- Changes to Direct Deposit Information ☐
- Cancellation of Direct Deposit ☐

### General Information

Organization Legal Name		Contact Person	
E-mail Address (for direct deposit notification)		(Area code) Telephone Number	Extension
Street Address, Office Number, R.R., or P.O. Box			
City, Town		Province/Territory	Postal Code

Request applies to the following project(s):

Project Number	Program Name	Project Location

### Privacy Notice:

The information you provide on this form is collected by Employment and Social Development Canada (ESDC) under the authority of the *Department of Employment and Social Development Canada Act (DESDC Act)* to effect and administer direct deposit payments for grants and contributions. ESDC will monitor the initial deposits and may cross reference with other funded programs for verification purposes of the banking information. Participation is voluntary. However refusal to provide this information will result in not receiving payments through the direct deposit system.

Your personal information will be retained in Personal Information Bank: ESDC PPU 298 and administered in accordance with the *DHRSD Act*, and the *Privacy Act*. You have the right to the protection of, and access to, your personal information. Instructions for obtaining this information are outlined in the government publication entitled Info Source, which is available at the following web site address: [infosource.gc.ca](http://infosource.gc.ca). Info Source may also be accessed on-line at any Service Canada Centre.

## Authorization

I, undersigned, am legally entitled to sign the agreement on behalf of the organization and confirm that the information included in this form is accurate and complete. I/we authorize ESDC to deposit, in the account indicated in this form, all payments in accordance with the terms and conditions of the agreements concluded with ESDC for the indicated project(s). I/we authorize ESDC and Public Services and Procurement Canada (PSPC) to proceed with the verification of this account by the deposit of an amount of \$5.00 of the project funds and I agree to confirm, upon request by ESDC, that the deposit has been done in the right account. I understand that this Due Diligence procedure **is mandatory**. I/we also authorize ESDC to monitor initial deposits and cross reference with other funded programs for verification purposes of the banking information.

Printed Name

Signature

Date (yyyy-mm-dd)

Printed Name

Signature

Date (yyyy-mm-dd)

Printed Name

Signature

Date (yyyy-mm-dd)

## Financial Information

A blank '**VOID**' cheque must be included with the form.

If you are **not** submitting a voided cheque, have your financial institution complete the following information.

Branch Number

Institution Number

Account Number

Name(s) of account holder(s)

Financial Institution Stamp



**\*\*\* ESDC is not responsible for the problems which could arise if the provided information is inaccurate or incomplete. The department can refuse a request for registration.**