



Finance Department
General Services Division

ACH Application for Electronic Payments

Company Information

Name: _____ **Date:** _____
EIN# _____
Operating Address: _____ **Phone:** _____
(Street Address) **Fax:** _____

(City) (State) (Zip Code)

Banking Information

Bank Name: _____
Bank Address: _____
(Street Address)

(City) (State) (Zip Code)
Bank Phone #: _____
Name on Account: _____
Account Number: _____
Routing Number: _____
(ACH Transfers Only)
Company ID#: _____
Banking Contact: _____ **Phone:** _____
Email: _____

Please return by fax 510-981-7390 or mail to:

Finance General Services
2180 Milvia Street, 3rd Fl.
Berkeley, CA 94704