



City of Chattanooga
Department of Finance & Administration
Accounts Payable Division
 101 E 11th St Suite 101
 Chattanooga, TN 37402
 Phone (423) 643-7374

Internal Use Only

Supplier Name: _____
 Supplier Number: _____

ACH Authorization Form

PLEASE BE ADVISED THAT the completed form authorizes the City of Chattanooga to make payments to the below listed company by ACH directly to your bank account. This authorization will remain in effect until revoked. The completed form should be uploaded into the Supplier Portal. Please reach out to suppliersupport@chattanooga.gov if you have questions.

Payee Information

Company Name ("Supplier"): _____
 Address: _____
 City, State ZIP: _____ Taxpayer ID Number: _____
 Mailing address (if different from street address): _____ Remittance Email Address: _____
 _____ Fax Number (including area code): _____
 Telephone Number (including area code): _____

The City of Chattanooga ("The City") is hereby authorized to initiate entries to the account indicated at the Financial Institution ("The Bank") listed herein, and if, necessary, initiate adjustments for any transactions credited/debited in error. This authority will remain in effect until The City is notified by The Supplier per the procedures listed below.

Supplier Representative Name (print): _____ Signature and Date: _____
 Supplier Representative Name (print): _____ Signature and Date: _____

All signers must have authority to sign financial documents on behalf of the entity receiving funds.

Financial Institution Information

Name and address of Financial Institution: _____ Routing number and depositor account title: _____

 Type of Account: Checking _____ Savings _____
 Account Number: _____

Financial Institution Contact Information

Bank _____ Representative name and title _____ Phone number _____

Cancellation: The agreement represented by this authorization remains in effect until cancelled by the Supplier by notice to the City. Upon cancellation by the Supplier, the Supplier should notify the receiving Bank that they are doing so. The agreement represented by this authorization may be cancelled by the Bank by providing the Supplier a written notice 30 days in advance of the cancellation date. The Supplier must immediately advise the City if the authorization is cancelled by the Bank. The Bank cannot cancel the authorization by advice to the City.

Changing Receiving Financial Institutions: The payee's ACH authorization will continue to be received by the selected Bank until the City is notified by the Supplier of the wish to change the Bank receiving the deposit. To effect this change, the supplier will complete a new ACH Authorization form at the newly selected Bank. It is recommended that the supplier maintain accounts at both Banks until the transaction is complete, i.e. after the new Bank receives the Supplier's ACH deposit.

False statements or Fraudulent claims: Federal law provides a fine of not more than \$10,000 or imprisonment for not more than five (5) years or both for presenting a false statement or making a fraudulent claim.