

2010

City of South Padre
Island, TX

Finance Department

[ACH PAYMENTS FOR ACCOUNTS PAYABLE]

CITY OF SOUTH PADRE ISLAND VENDOR PAYMENT BY
ELECTRONIC FUNDS TRANSFER AGREEMENT



CITY OF SOUTH PADRE ISLAND VENDOR PAYMENT BY ELECTRONIC FUNDS TRANSFER AGREEMENT

I, _____ (name) _____, (title) of _____ (Vendor name) (“Vendor”) hereby request that any funds due and owing to Vendor or which may be due and owing to Vendor at some future date, from the City of South Padre Island, Cameron County, Texas (the “City”) be sent directly to the bank account designated in Attachment A. I understand that the City will apply this request to all funds owed to the Vendor, not just a select few. If Vendor is overpaid, Vendor gives its consent to the City to debit its account to recover any amounts paid.

Vendor agrees and understands that the direct deposit of funds by the City into the account set forth in Attachment A constitutes full and final payment of amounts owing by the City to Vendor as if same had been paid via check or warrant issued to Vendor.

From time to time, the City may need to correct the amount owed to the Vendor, which correction may result in a payment by check. The City will not be responsible for forwarding these checks to the bank, but will deliver these checks through regular procedures currently in place, or through some mutually agreed upon procedure, to Vendor.

Vendors, its successors and assigns hereby release, relinquish and discharge the City and its former, present and future agents, employees and officers from any liability arising out of the sole and / or concurrent negligence or other actionable act or omission of the City for the claim, demand, fine or damage in any way arising from (i) the City’s direct deposit of Vendor’s funds into the bank account set forth in attachment A or (ii) the City’s failure to deposit any funds into Vendor’s bank account or (iii) an error or omission on the part of the City in depositing funds.

Vendors recognizes that the City will cease direct deposit if the information needed to make these deposits becomes invalid due to any changes made by the bank or Vendor. In such a case, it is the Vendor’s responsibility to provide the City with updated deposit information that will enable the City to continue direct deposit.

If Vendor desires to designate a different bank or account number, Vendor acknowledges that it must notify the City in writing of such change if Vendor desires to continue direct deposit. Vendor understands and agrees that it will take approximately thirty (30) days for the banking system and the City to re-execute the bank notification process. If Vendor desires to discontinue direct deposit, then Vendor must notify the City of such desire in writing at least thirty (30) days in advance.

“A Certified Retirement Community”



Attachment A

Vendor Information

Contact Person _____ Phone# _____

Vendor Name _____

Vendor Account # _____

Account Type

Please check one of the two types. This account is a:

Checking Account

Savings Account

Bank Name _____ Account# _____

Bank Address _____ Bank Phone# _____

Bank ABA Routing# _____

(Please verify routing information with your bank)

Authorized Signature _____ Date _____

Vendor/Contractor

Please enclose a VOIDED CHECK. If a **VOIDED** check is not attached, your Direct Deposit request will not be processed and your request will be cancelled after **60 days**. On Lock Box accounts or zero balance accounts, please indicate "NO CHECKS" and state the reason on the bottom of this page. For additional information or assistance in completing this form, call Rosie Guzman at **956-761-3065**. Fax **956-761-3892**

Mail the completed information to:

City of South Padre Island

Attn: Rosie Guzman – Accounts Payable

4601 Padre Blvd

City of South Padre Island, TX 78597

Void check not attached because: LOCKBOX ACCOUNT
 ZERO BALANCE ACCOUNT

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