



Vendor Information Form

Vendors interested in being added to the City of Tallahassee's vendor list should return this application to Procurement Services by email to vendors@talgov.com, or mail to the City of Tallahassee, 300 South Adams Street, Tallahassee, FL 32301, or by fax to (850) 891-8796.

NOTE: A completed IRS W-9 Form **MUST be attached to process this application.**

This is not an application to be placed on the City's vendor list to receive solicitations. If you have any questions, please contact Procurement Services at (850) 891-8280.

As a new vendor with the City of Tallahassee, you will be automatically enrolled into the [BIZ-e](#) portal.

<input type="checkbox"/> New Vendor		<input type="checkbox"/> Change of Information to Existing Vendor		
Payment Method:		<input type="checkbox"/> VCard - Virtual Mastercard (paid within 5 to 7 days)	<input type="checkbox"/> Direct Deposit (paid within 18 to 22 days)	
Legal Company Name:				
Preferred BIZ-e Username:				
Purchase Order Mailing Address	Street 1:			
	City:	State:	Zip:	
Payment Remit Address	Street 1:			
	City:	State:	Zip:	
Primary Contact Person	Name:			
	Email Address:			
	Phone Number:	Fax Number:		
Contract Management Contact	Name:			
	Email Address:			
	Phone Number:	Fax Number:		
VENDOR CERTIFICATION: I certify that the above information is accurate and complete.				
Signature ▶ _____		Date ▶ _____		
Complete W-9 Form and submit with application				
City/Department Contact Person:			City Contact Phone #:	
CITY OF TALLAHASSEE USE ONLY	<input type="checkbox"/> PR	<input type="checkbox"/> HR	Employee ID/Vendor ID:	HCM Class:
	Date Recvd:		Date Entered:	Entered By:
	<input type="checkbox"/> Withholding		<input type="checkbox"/> Temporary One-Time Only Vendor	
Vendor ID:				

Accounts Payable Direct Deposit

City of Tallahassee Procurement Services offers the option of receiving payments by direct deposit. With direct deposit, payments are made electronically by ACH directly to the payee's bank account.

This includes travel payments made to City of Tallahassee employees as well as payments to external vendors doing business with the City of Tallahassee. Employee payroll direct deposit is handled separately through the City's Payroll Office.

Direct deposit is:

- ✓ **Quick** – No mail time, funds are immediately available on deposit
- ✓ **Convenient** – no cost and no worry about getting to the bank to make a deposit
- ✓ **Secure** – no paper checks to handle, it won't get misplaced, lost or stolen

If you are interested in setting up direct deposit, here is the process:

1. Read the Terms and Conditions.
2. Fill out the included Accounts Payable Direct Deposit Payment Authorization.
3. Email it to the City of Tallahassee Procurement Services Department.
4. Direct deposit begins and all payments to the payee will be sent by ACH.

Existing vendors, register for [BIZ-e](#) to view detailed payment information

Should you have any questions on how to prepare the form, or require additional information please call 850-891-8280.

Sincerely,

André Libroth
Procurement Service Manager

Accounts Payable Direct Deposit Payment Authorization Form

Directions

1. The form must be typed and submitted electronically.
2. Payments will be made using the Cash Concentration or Disbursement (CCD) format.
3. Payees must submit a new form with updates if account information changes.
4. Assistance is available by calling the Procurement Services Department at 850-891-8280.

NOTE: This form only authorizes payment from Accounts Payable. Employee payroll direct deposit is handled separately through the City's Payroll Office.

<input type="checkbox"/> New Enrollment	<input type="checkbox"/> Update Enrollment	<input type="checkbox"/> Cancel Enrollment
Payee Type: <input type="checkbox"/> Employee <input type="checkbox"/> Vendor		Employee ID/Vendor Tax ID:
Payee Name:		
Street Address:		
City:	State:	Zip:
E-Mail:		Phone Number:
Bank Name:		
Routing Transit Number <div style="border: 1px solid black; width: 100%; height: 20px; display: flex; justify-content: space-between;"> </div>		Account Number <div style="border: 1px solid black; width: 100%; height: 20px; display: flex; justify-content: space-between;"> </div>
(9 digit number on bottom left of check)		
Payee Certification <input type="checkbox"/> By checking this box, I am confirming my electronic signature to authorize payments to be sent to the financial institution named above and deposited to the designated account. I have read and accept the Terms and Conditions for Account Payable Direct Deposit Participation.		
Or save this form and email to vendors@talgov.com		

Terms & Conditions for Accounts Payable Direct Deposit Participation

Please Read This Carefully

The bank account information will remain confidential to the extent provided by law and necessary to make Direct Deposit payments. The requested information is required for processing payments through Direct Deposit.

This form authorizes the City of Tallahassee to initiate credit and, if necessary, debit entries and adjustments for any credit entries made in error to the account indicated, at the depository financial institution named, and to credit or debit the same from such account. This authority will remain in effect until cancelled in writing. Further, the origination of Automated Clearing House (ACH) transactions to the account must comply with the provisions of state and federal law and regulations.

This form only authorizes payment from Accounts Payable. Employee payroll direct deposit is handled separately through the City's Payroll Office.

Information Found on Checks

Most of the information needed to complete this form is printed on your checks. Be sure that the payee's name is written exactly as it appears on the check. Direct deposits will not be made to an account held in a different name from the payee. Be sure current address is shown.

Cancellation

This authorization remains in effect until cancelled by the payee by resubmitting this form. Upon cancellation by the payee, the payee should also notify the receiving financial institution that the authorization has been cancelled. Additionally, the City of Tallahassee expressly reserves the right to discontinue Direct Deposit at any time.

This authorization may be cancelled by the financial institution by providing the payee a written notice 30 days in advance of the cancellation date. However, a cancellation by the financial institution for reason of fraud shall be effective immediately. The payee must immediately advise the City of Tallahassee Procurement Services if the authorization is cancelled by the financial institution.

Violation of these terms and conditions may cause, at a minimum, termination of participation in Direct Deposit.

Financial Institution Information and Certification

Provide the payee's account number, and account name or title exactly as they appears in the financial institution's records.

Changing Recipient's Financial Institution

The payee's direct deposit authorization will remain in effect until withdrawn in writing with sufficient notice to Procurement Services to allow adequate time to effect termination. The City of Tallahassee will not be responsible for any loss which may arise solely by reason of error, mistake or fraud regarding information provided on this Direct Deposit Payment Authorization form.

If the payee or authorized representative changes their financial institution, the payee must resubmit this form to the City of Tallahassee. Any changes to the existing direct deposit authorization, such as the bank account number, will cause the original authorization to be cancelled. A new Direct Deposit Payment Authorization form must be completed to re-enroll. It is recommended that the payee maintain the previously authorized account until the transition is complete.