



# City of Boulder, CO – Finance Department VENDOR FORM

## Vendor Information

New Vendor

Existing Vendor Change of Information

Federal Tax ID or  
Social Security #:

**(W-9 required for all new vendors.  
Immigration Affidavit may also be required.)**

Individual or Legal  
Business Name:

**(Full name exactly as listed on your  
tax return)**

DBA (if different):

**(Name you are Doing Business As if  
different than name above)**

Remittance Address:

City, State, Zip Code:

Contact Name:

Phone Number:

Remittance  
E-mail Address:

**(Must be provided for remittance notices)**

Purchase Order  
E-mail Address  
(if different):

**(Must be provided to receive purchase  
orders. Use fax number if email address  
is not available.)**

## ACH Authorization Agreement

I (Company) hereby authorize the city of Boulder, Colorado, hereafter called City, to initiate credit entries to my (our) account at the depository financial institution named below, herein after called Depository and to credit the same to such account. If City funds to which I (Company) am not entitled are deposited in my (our) account, I (Company) authorize the City to direct the Depository to return those funds. I (Company) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. Law and the rules as set forth by the National Automated Clearing House Association (NACHA).

This authorization is to remain in full force and effect until the City has received a notice of termination from me, or a company representative, in such time and in such manners as to afford the City a reasonable opportunity to work on it. I (Company) further acknowledge that any remittance information associated with payments that I (Company) receive will be made available to me through a Notice of Payment sent by the City to the remittance e-mail address designated by me (Company).

## Bank Account Information

Depository Name:

Bank ABA Routing  
Number:

Account Number:

Account Type:

Checking

Savings

## Signature

Authorized Signature:

Date:

Title:

Print Name:

**All information is required. Please attach a voided check or bank letter to this form if you wish to receive your payments via ACH. All completed forms should be emailed to [payments@bouldercolorado.gov](mailto:payments@bouldercolorado.gov); faxed to (303) 441-4381; or mailed to City of Boulder Finance Department, 1777 Broadway, Boulder, CO 80302. Please email or call us at (303) 441-3068 with questions.**