



# Town of Palm Beach

Finance Department  
PO Box 2029  
Palm Beach, FL 33480

Phone: 561-227-6333  
Fax: 561-835-4632  
Email: [invoices@townofpalmbeach.com](mailto:invoices@townofpalmbeach.com)

## ACH Authorization Form

Vendor Name	<input type="text"/>		
Vendor Address	<input type="text"/>		
Phone Number	<input type="text"/>	Fax Number	<input type="text"/>
Contact Name	<input type="text"/>		
Email Address	<input type="text"/>		

\*Remittance Advice will be sent to the Email address listed above

## ACH Action Request (check one):

Start       Change       Stop

## Account Information

Name of Financial Institution	<input type="text"/>
Account Number	<input type="text"/>
Routing Number	<input type="text"/>

I hereby authorize the Town of Palm Beach to initiate credit transactions to my account. I also authorize the Town of Palm Beach and the depository named above to initiate, if necessary, debit entries or adjustments of any credit entries in error to my account indicated above.

The authority is to remain in full force and effect until the Town of Palm Beach has received **written notification** of its termination in such a manner as to afford the Town of Palm Beach reasonable opportunity to act.

If you close or change your banking account number please notify Accounts Payable at the Town of Palm Beach, [invoices@townofpalmbeach.com](mailto:invoices@townofpalmbeach.com). Failure to do so may result in deposit failure.

Authorized Signature	<input type="text"/>	Date	<input type="text"/>
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Please attach a voided check to this form and email to [invoices@townofpalmbeach.com](mailto:invoices@townofpalmbeach.com), fax to 561-835-4632 or mail to Town of Palm Beach, Attn: Accounts Payable, PO Box 2029, Palm Beach, FL 33480