

ACCOUNTS PAYABLE DIRECT DEPOSIT

**ELECTRONIC FUNDS TRANSFER ENROLLMENT FORM
AND AGREEMENT**

LAS VEGAS VALLEY WATER DISTRICT

Please complete this form and fax this side only to (702) 258-7153

Name: _____		
Vendor Contact: _____	Telephone No.: _____	
Address: _____	Fax No: _____	
City: _____	State: _____	Zip Code: _____

Bank Information		
Bank Name: _____	Routing and Transit No.: _____	
City: _____	State: _____	Acct Number: _____
Telephone No.: _____	Checking Acct: _____	Savings Acct: _____

Remittance Information	
E-Mail Address: _____	
Or	
Fax Number (Include area code) _____	

Please read the terms and conditions.

Vendor Acceptance		
I hereby authorize EFT payments to the account number above under the terms and conditions of this Agreement (front and back) and verify that the information contained on the face hereof is correct.		
_____ Signature	_____ Printed Name	_____ Date

TERMS AND CONDITIONS FOR ELECTRONIC FUNDS TRANSFERS

By submitting this completed and signed Electronic Enrollment Form and Agreement, you agree (a) to accept payments from the Las Vegas Valley Water District (District) through Electronic Transfer(s) (EFT) and (b) to these Terms and Conditions for Electronic Funds Transfer Payments and (c) that the District can rely on the information supplied on the Enrollment form. These Terms and Conditions are hereby incorporated into all existing agreements between you and the District.

1. The District will initiate EFT payments to pay all obligations to you arising from existing agreements, and you will accept EFT payments to satisfy all such obligations. EFT payments will be made to the financial institution and account number shown on your enrollment form.
2. Payment will be made in accordance with and governed by the Corporation Trade Rules of the National Automated Clearing House Association (NACHA). All EFT transactions are also governed by and shall be in accordance with Article 4A of the Uniform Commercial Code as adopted in Nevada.
3. You or an authorized representative must communicate any changes in the enrollment information to the District in writing within 14 days of the effective date to allow adequate time to respond to the changes. The District will not be responsible for any loss arising solely from error, mistake or fraud regarding the information on your EFT Enrollment Form.
4. These EFT terms and conditions neither enlarge nor diminish the respective rights and obligations contained in the agreement with you. Payment will be considered made when your financial institution has received or has control of a payment transaction from the District.
5. The District has the right to adjust future payments if payments previously made are found to be duplicates, in excess of requirements, fraudulent, in error or require any other adjustment under the terms of an agreement with you. This may be accomplished by using an ACH debit.
6. The District is responsible for an EFT transaction only to the time your financial institution receives or has control of the transaction. The District will be responsible for loss of data only when the loss is due solely to negligence of the District.
7. Either party may terminate this EFT agreement by sending written notice, effective 10 business days after receipt.