

Supplier Payment Information Changes

Section 1: Action Required

Please Select One or More Options Below

Add Supplier Payment Address Remove Supplier Payment Address Add Bank Information Remove Old Bank Information

Add Accountant Contact Info Remove Old Accountant Contact Info Change Payment Method Other- Indicate here:

Federal Tax Identification Number

Payment Method- If Changing Payment Method, Select New Preferred Method Only

Check Preferred EFT Preferred **NOTE: See EFT enrollment requirements below* Both- Explain:

Supplier Name

Alternative DBA Name (If Applicable)

Effective Date of New Information

End Date of Old Information

Payment Remittance Address

New/ Current Address

New/ Current City, State

Postal Code

Old Address No Longer In Use (If Applicable)

Old City, State (If Applicable)

Postal Code

Vendor's Accounts Receivable Contact Information

Vendor's Old/Removed Contact Information (If Applicable)

Name (Print) _____
Individual (Group Email If Available) _____
Telephone Number _____

Section 2: Electronic Payment Enrollment

***MUST ATTACH VOIDED CHECK or CERTIFIED BANK LETTER and W-9 OR ELSE EFT ENROLLMENT WILL BE DENIED**

Required Documents Attached? YES NO

Bank Routing Number Account

Number

Internal Official Use Only

Supplier Number _____

Date of Change _____

Changes Made By _____

Be aware that follow-up by NSTec may occur to ensure validity and accuracy banking information.

Approver Signature

Bank Name _____
City, State, Zip Code: _____
Name on Account _____
Authorized Signer _____
User Telephone Number _____

Submit completed form and required documents

to:

SupplierMaint@nv.doe.gov

Section 3: Authorized Account Signer Information

E-mail:

By signing below, I hereby agree that I have read and agree to the terms and conditions stated below

Signature: _____



I hereby authorize National Security Technologies, LLC (NSTec), to initiate credit entries to the account at the bank listed below for all payments. This agreement will remain in effect until I notify NSTec of the desire to cancel or change this service or until NSTec notifies me that this service has been terminated. I understand I must allow reasonable time for my instructions to be executed. I authorize and request the bank listed below to accept any credit entries by NSTec to such account and to credit the same to such account. NSTec will not debit or deduct funds directly from my bank account for over-payments and/or refund requests, but NSTec will seek permission to debit my bank account for any adjustments or corrections to resolve duplicate payments (where "duplicate" is defined as NSTec sending multiple identical payments in error) or erroneous payments due to a bank account setup error. NSTec will attempt to recover the duplicate or erroneous payment via a debit to my account to the extent permitted by state law and with prior contact to me. If an electronic debit is unsuccessful, NSTec will notify me in writing to reach an alternative arrangement for reimbursement. NSTec strictly adheres to the National Automated Clearing House Association (NACHA) guidelines.