



**The Corporation of the City of Sault Ste. Marie**  
**Electronic Funds Transfer / Direct Deposit Information**

I hereby authorize:

**Company Name:** \_\_\_\_\_  
**Company Address:** \_\_\_\_\_  
\_\_\_\_\_

to deposit payments to The Corporation of the City of Sault Ste. Marie to the bank account indicated.

**Vendor Information**

<b>Name</b>	The Corporation of the City of Sault Ste. Marie				
<b>Address</b>	99 Foster Drive				
<b>City</b>	Sault Ste. Marie	<b>Province</b>	ON	<b>Postal Code</b>	P6A 5X6
<b>Email Address for Remittance Advice</b>	<a href="mailto:MAT@cityssm.on.ca">MAT@cityssm.on.ca</a>				
<b>Contact Phone Number</b>	(705) 759-5278				

**Banking Information**

<b>Bank Name</b>		<b>Bank Address</b>			
RBC Royal Bank		602 Queen Street, East Sault Ste. Marie, ON P6A 5N1			
<b>Branch Number</b> (5-digit number)	<b>Institution Number</b> (3-digit number)	<b>Account Number</b> (maximum 12-digit number)			
04362	003	000-018-2			

**Authorization**

<b>Name</b>	Shelley Schell, CPA, CA	
<b>Title</b>	Chief Financial Officer / Treasurer	
<b>Signature</b>	_____	<b>Date</b>

**\* Please quote Customer No. and Month of Remittance in Notification Emails**

**Instructions: Please enter Company Name and Address and email to [MAT@cityssm.on.ca](mailto:MAT@cityssm.on.ca) for approval**

**\*\*A Customer Number will be emailed to you upon approval**