



# COUNTY OF FARIBAULT

BLUE EARTH, MINNESOTA

On behalf of (below named entity) I have the authority to and hereby authorize Faribault County to make payment of written claims submitted to Faribault County by electronic deposit to the account listed below until this authorization is revoked in writing and upon reasonable notice to Faribault County. I further authorize Faribault County to electronically and without notice to deduct from this account any funds mistakenly deposited therein by Faribault County.

I hereby declare that written claims submitted to Faribault County are and will continue to be just and correct and that no written claim shall be submitted where such claim has already been paid. If any written claim submitted to Faribault County has also been paid, I hereby authorize Faribault County to electronically, and without notice, to deduct from this account any funds paid on a claim that has already been paid.

## APPLICATION INFORMATION:

Vendor Number (office use only) \_\_\_\_\_

Company Name or Individual \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Email \_\_\_\_\_

To receive remittance advise via email. Please print clearly.

## BANK INFORMATION:

Name of Bank \_\_\_\_\_

Routing Transit Number (9 characters) \_\_\_\_ \_

Account Number \_\_\_\_\_

Please check one \_\_\_\_\_ Checking account \_\_\_\_\_ Savings account

Account Holder's Signature \_\_\_\_\_ Date \_\_\_\_\_

Position (if applicable) \_\_\_\_\_

**ENCLOSE A VOIDED CHECK** Is this a Business Account \_\_\_\_\_ Yes \_\_\_\_\_ No

Faribault County Auditor/Treasurer  
415 North Main Street P.O. Box 130  
Blue Earth MN 56013

507-526-6260