



MAG

Expert Resources. Enriching Lives.

AUTOMATED CLEARING HOUSE (ACH) REQUEST FORM

Please submit this form, a blank check or letter from your banking institution confirming your account information to ach@mountainland.org or mail to Mountainland Association of Governments, Attn: Accounts Payable 586 E 800 N, Orem, UT 84097.

Vendor Information:

Vendor Name: _____

Remittance Address: _____

Remittance City, State, Zip: _____

Contact Name and Phone: _____

Email Address: _____

Banking Information:

Vendor's Bank Name: _____

Bank Address: _____

Bank City, State, Zip: _____

Bank Contact Name and Phone: _____

Bank ABA Routing #: _____

Bank Account #: _____

Account Type:

(please check only one) Checking Savings

Vendor's Authorization:

By signing below you confirm that you have the authority to make this determination. Further, you are authorizing MAG to begin transferring payments for your invoices to the above listed account.

Signature

Title

Phone Number

Date

Please contact MAG at 801-229-3800 or ach@magutah.org with any questions.