**Vendor Direct Deposit Instructions**

To enroll in the direct deposit program, complete the Vendor Deposit Enrollment form located here: <https://www.csusb.edu/accounts-payable/forms-documents> Note that this form is designed only for Vendors, Independent Contractors and Suppliers to the University for payment of invoices through Accounts Payable.

The form itself is fillable online and can be digitally signed and submitted. Help information for each field can be found by hovering over any field with your mouse pointer.

Once the form has been completed, please submit it to Accounts Payable via email at [payables@csusb.edu](mailto:payables@csusb.edu) Please allow 7 to 10 business days to complete your request. All information will be independently authenticated with the officer of your company before a Direct Deposit is activated. If we are unable to authenticate any of the data provided, check payments will continue to be issued.

**Instructions**

**Section 1 – Action Requested**

* **Enroll:** Check the box “Enroll” to complete a new enrollment or re-enrollment after a cancellation.
* **Cancel:** Check the box “Cancel” to cancel your Direct Deposit. All future payments will be in the form of a check.
* **Change/Update:** Check the box “Change/Update” to complete a change to your account, financial institution, bank routing number or bank account number.

**Section 2 – Payee Information**

* **Full Legal Business Name**: Enter the legal business name of your firm as it would appear on your IRS file.
* **Main Business Telephone Number:** This should be the number should the main telephone number where your business can be reached during normal business hours.
* **If Payee if an Individual or DBA:** If your business is operating under the name of an individual or a DBA (doing business as), please list it here.
* **Business Email Address:** Provide the main business email address of your firm.
* **Business Street Address:** Enter the street address, city, state and zip code of your business’s main location. This information is required in order to authenticate your information.
* **SSN, ITIN or FEIN:** Please enter the last four digits of your tax identification number. This would be either your Social Security Number (SSN) or International Tax Identification Number (ITIN) if you are an individual or sole proprietor, or your Federal Employer Identification Number (FEIN) if you are a corporation or partnership.
* **Last PO Number Issued by CSUSB:** If we have done business with you in the past, please enter a valid Purchase Order (PO) number recently provided to you by our Purchasing Department. This information will assist us in validating the authenticity of your enrollment. If you have not received a PO number prior, you may skip this field.
* **Last Invoice Number Paid by CSUSB:** Please provide the last invoice number in which you billed CSUSB. This information will assist us in validating the authenticity of your enrollment. If you have not billed us previously, you may skip this field.
* **Billing Department Contact:** Please enter the name of the person in your Billing Department who would be our contact for payment issues and disputes.
* **Billing Department Contact Phone:** Please enter the telephone number of the person in your Billing Department who would be our contact for payment issues and disputes.
* **Business Website Address:** Please enter the main business website address where we can find your company listed on the internet.
* **Name of Authorizing Officer of the Company:** Please enter the full name of the person who is authorized to provide information about your company. This can be the name of the Controller, CFO, President or Accounting Manager.
* **Authorizing Office Title:** Please list the title of the officer of your company who is authorized to provide information about your company.
* **Officer Contact Telephone:** Please list the full telephone number where we can reach the officer of your company to authenticate anything provided in this enrollment form.

**Section 3 – Banking Information**

* **Account Type:** Indicate if your account is a checking or savings account. Only one box must be checked. If your account is a sweep account or a lockbox, please choose “Checking”.
* **Bank Account Number:** Enter Bank Account Number. If you need assistance locating this number, please contact your financial institution. Important: Please carefully double check this information for accuracy prior to submitting the form to Accounts Payable.
* **Bank Routing Number:** Enter your bank routing number. If you need assistance locating this number, please contact your financial institution. Important: Please carefully double check this information for accuracy prior to submitting the form to Accounts Payable.
* **Financial Institution Name:** Enter the name of your financial institution.
* **Financial Institution Telephone #:** Enter the telephone of your financial institution. This may be either the branch location or the bank’s central number.
* **Financial Institution Branch Address:** Enter the complete street address of your financial institution.

**Section 4 – Authorization**

* **Enrollment:** Please carefully read and agree to the authorization section. Your signature authorization limits the University to deposit funds into your bank account and, in the event of a deposit made in error, allows CSUSB to request from the bank, a corrective reversal of the transaction. This corrective reversal must be in the exact amount of the deposit, no more or less and must be requested from the bank within five (5) business days from date that the deposit was made in error. CSUSB will never have access to your bank account and cannot view the details of your banking transactions, account balance or have the ability to make indiscriminate withdraws from your account.
* **Signature:** Click to digitally sign the form.
* **Print Full Name:** Enter the full name of the applicant.
* **Date:** Enter the date the document was signed.

**Frequently Asked Questions**

**What happens after I submit the Enrollment Form?**

* The Accounts Payable office will verify your form for completeness and authenticate the data you have provided. Authentication may be in the form of reviewing your company information on the internet, calling your firm from a known number, reaching out to a known contact with your firm, or calling your main branch and requesting to verify the information on this enrollment with an officer of the company. In order eliminate the potential risk of fraud, we will not complete an enrollment if we are unable to authenticate the data provided on the enrollment form.
* Please allow 7 to 10 business days to establish your Direct Deposit enrollment. You will be notified by email that your enrollment has been created.

**Can I have my check deposited into multiple banks?**

* Our current system does not allow for deposits made to more than one bank.

**When will my Direct Deposit funds be posted to my account?**

* As soon as your payment is made by Accounts Payable, a transmission of your payment data will be sent to your financial institution. In general, most deposits are available the next or second business day.
* While most financial institutions post funds to accounts at the beginning of the bank business day, this is not a universal practice. Some institutions post funds in the afternoon instead of the morning. It is strongly recommended that you check with your financial institution to determine when your funds will be available.

**How will I know that my payment has been sent to my financial institution?**

* You will be notified at the email address you listed on your enrollment form. This email will show what is being deposited and the date the transaction occurs.
* For security purposes, no sensitive banking information is transmitted in this email.

**What happens if a payment is rejected by my financial institution?**

* If a payment is rejected by your financial institution due to an invalid account number, the Accounts Payable Department will notify you and will remove you from Direct Deposit, and issue a check payment. The reissue check payment will be issued 3 to 5 business days after the Accounts Payable Department receives the returned payment from your financial institution.
* You will need to re-enroll in Direct Deposit by completing a new form.

**If I am currently on Direct Deposit and want to change financial institutions, how long should I keep my old account open?**

* To change/update your account and/or financial institution, complete a new Direct Deposit Enrollment Form with your new information and submit it to Accounts Payable.
* You should keep your old account open until your first payment is deposited into your new account.
* If your old account is closed before you notify Accounts Payable of the change, the payment will be rejected by your financial institution. A replacement check will be issued once the bank returns the payment.

**What happens if I closed my account but didn’t cancel my Direct Deposit?**

* Your financial institution will return the funds to us within 5 to 7 days, stating that your account has been closed. The Accounts Payable Department will cancel the direct deposit on your account. Once the funds have been returned, Accounts Payable will reissue the payment by check.
* You should notify us immediately to cancel your Direct Deposit enrollment before your account is closed.

**Whom do I contact if I have any questions about Direct Deposit?**

* Contact your financial institution with questions concerning their handling of payments made by Direct Deposit.
* If you have questions about Direct Deposit enrollment, eligibility, or how the program will affect you, contact the Accounts Payable Department at 909-537-5155.

**Privacy Notice**

The Information Practices Act of 1977 (Civil Code Section 1798.17) and the Federal Privacy Act (Public Law 93-579) require that this notice be provided when collecting personal information from individuals. Information requested on this form is used by the California State University, San Bernardino Accounts Payable for the purposes of identification and enrollment processing. It is mandatory to furnish all information requested on this form. Failure to provide the mandatory information may result in the enrollment action not being processed or being processed incorrectly.