



Use this form to **start** direct deposit the following amounts:

- your income tax refund and goods and services tax/harmonized sales tax (GST/HST) credit payments including certain related provincial payments;
- your Canada Child Tax Benefit (CCTB) payments including certain related provincial and territorial payments.

Also use this form to **change information** you already gave us. For more information, see the back of this form.

Identification

First name and initial	Last name	
Mailing address: Apt. No. – Street No. Street name		
P.O. Box	R.R.	
City	Prov./Terr.	Postal code

Your social insurance number

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Is this a new address?

Yes 1 No 2

If yes, enter the date you moved.

Year	Month	Day

Check the box(es) below to show your choice(s).

Income tax refund and GST/HST credit

- Check this box to have your income tax refund and GST/HST credit payments deposited into your bank account held in Canada. Attach a blank cheque with the banking information encoded on it and write "VOID" across the front, **or** complete the banking information area below (see the example on the back).

Branch number (5-digit number)	Institution number (3-digit number)	Account number (maximum 12-digit number)
460 _____	461 _____	462 _____

CCTB payments

- 463** Check this box to have these payments deposited into the **same bank account** held in Canada as your income tax refund and GST/HST credit payments.
- Check this box to have these payments deposited into a **different bank account** held in Canada. Attach a blank cheque with the banking information encoded on it and write "VOID – CCTB" across the front, **or** complete the banking information area below (see the example on the back).

Branch number (5-digit number)	Institution number (3-digit number)	Account number (maximum 12-digit number)
471 _____	472 _____	473 _____

Certification

I, as the person entitled to receive the payments, authorize the Receiver General to deposit the payments described above into the above-noted bank account(s) until further notice.

_____	() _____	_____
Signature	Telephone number	Date

