



Atlantic Canada
Opportunities
Agency

Agence de
promotion économique
du Canada atlantique



Canada

Pre-Authorized Repayment / Direct Deposit Authorization

Applicant Name:

ACOA Project Number(s):

A- Pre-Authorized Repayment - Please attach a voided cheque and complete the following:

Name of Account Holder(s) (If different from above)

If you are not providing a voided cheque, please have the following completed and confirmed by your financial institution:

Branch No.: _____

Institution No.: _____

Account No.: _____

Name(s) of Account Holder(s): _____

Financial Institution: _____

Address: _____

Telephone No.: _____

Signature of Financial Institution Official

Date

This method of loan repayment will be used only with your authorization. All information will be kept confidential unless otherwise required by law.

B- Direct Deposit:

Progress disbursements of assistance can be deposited directly in the above-mentioned bank account. Do you wish to take advantage of this service?

Yes _____ **No** _____

I/We hereby authorize the Atlantic Canada Opportunities Agency to debit the bank account identified above, as per the repayment terms of the letter(s) of offer and any subsequent amendments. If I/we have checked YES for the Direct Deposit Service, I/we hereby authorize the Atlantic Canada Opportunities Agency to also credit the bank account identified above.

Signature of Authorized Signing Officer(s)

Date

Signature of Authorized Signing Officer(s)

Date