Revenu Québec

LM-2.M-V
2005-11

Request for Direct Deposit

Individuals in Business, Partnerships, Corporations and Other Legal Entities

This form is for use by individuals in business, partnerships, corporations and other entities wishing to request direct deposit of the amounts they receive from Revenu Québec pursuant to:

- the *Excise Tax Act* (GST/HST)
- the *Fuel Tax Act*
- the *Taxation Act* (corporations)
- the *Act respecting the Québec sales tax*
- the *Tobacco Tax Act*
- any other act administered by Revenu Québec

This form may also be used to request direct deposit of a refund from Revenu Québec subsequent to an overpayment of employee source deductions.

Enter only one financial institution and one account number for all amounts payable under the above-mentioned legislation. The account indicated on the form must be held in Canadian funds at a Canadian financial institution. If we are unable to deposit an amount in the account indicated on the form, we will mail a cheque for the amount to the address we have on file.

Complete one request form only; it will cover all your branches and divisions.

If you wish to cancel your direct deposit or change the banking information provided on a previous request, you must complete another copy of this form.

Check the appropriate box.

- ☐ First request
- ☐ Cancellation of direct deposit
- ☐ Change to a previous request

Identification number

Last name and first name of individual in business, or name of partnership, corporation or other entity

Address

Number | Street | Suite, apt. | P.O. box, postal station

City, town, municipality | Province | Postal code | Area code | Telephone

Name of financial institution

Number, street, postal box

City, town, municipality | Province | Postal code

Number of financial institution

Branch number

Account number*

IMPORTANT: Return this form with a blank cheque marked "VOID" to **Revenu Québec, Complexe Desjardins, C.P. 3000, succursale Desjardins, Montréal (Québec) H5B 1A4**. If your cheque is not personalized, include a document from your financial institution that contains information identifying you. Write your identification number on the back of the cheque.

* The individual in business, partnership, corporation or other entity indicated on the form **must be the holder of this account**.

This request must be signed by the owner of the business, by a partner (in the case of a partnership), or by the president, secretary or treasurer (in the case of an organization or a corporation). If another person is authorized to sign, please enclose with this form a completed form MR-69-V, *Power of Attorney, Authorization to Communicate Information, or Revocation*.

Name of requestor or authorized person (please print)

Signature of requestor or authorized person

Date