# \\americas.degussanet.com\dfs-003\SJO\home\W11023\data\profile redirected folders\Desktop\General Docs Back Up\Other\Logo.tmp.pngElectronic Funds Transfer/ACH Enrollment Authorization Form

Please fill out this form, attach your [W9](https://www.irs.gov/pub/irs-pdf/fw9.pdf) or [W8](https://www.irs.gov/forms-pubs/about-form-w8) accordingly, and return it duly signed for processing to the email address of the individual or department at Evonik who requested this information from you.

## Your Company Information

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Company Name: |  | | | | | | | |
| Remit to Address: |  | | | | | |  |  |
|  | Street Address | | | | | |  | Apartment/Unit # |
|  | *City* | | | |  | *State* |  | *ZIP Code* |
| Contact Person: |  | |  | Phone Number: |  |  | | |
| I would like the addendum/remittance information emailed to: | |  | | | | | | |

## Your Financial Institution information (USA and Canada Domestic Payments)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Bank Name: |  | | | | |
|  |  | | | | |
| Bank Address: |  | | | | |
|  | Street Address |  |  | | |
|  |  |  |  |  |  |
|  | City |  | State |  | ZIP Code |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Routing/ABA Number (ACH/EFT only): | | | | | |  | | | |  | | |  |  | | |  | | |  | | |  | | | | |  | | | | |  | |
| Bank Account Number: | | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | |  |  | | | | |
| Bank Account Currency: | | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | |  |  | | | | |
|  | | | | | |  | | | | | | | | | | | | | | |  |  | | | | | | |  |  | | | | |
| Transit Number (CANADA only): | | | | | |  | | |  | |  | Branch Number (CANADA only): | | | | | | | | | | | |  | | |  | | | |  |  | |  |  |  |
| For International Payments Only (Outside of USA and Canada) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bank Name: |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bank Address: |  |  | | | | | | | | | | | | | | | | | | | | | | |  |  | | | | | | | | |
|  |  | Street Address | | | | | | | | | | | | |  |  | | | | | | | | |  | Apartment/Unit # | | | | | | | | |
|  |  |  | | | | | | | | | | | | |  |  | | | | | | | | |  |  | | | | | | | | |
|  |  | City | | | | | | | | | | | | |  | State | | | | | | | | |  | ZIP Code | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Bank Account Currency: | | | |  |  | | | | | | | | | |  |  | | | | | | | | |  |  | | | | | | | | |
| Swift Code: | |  |  | | | |  | Intermediary Bank Name (if Required): | | | | | | | | | |  |  | | | | | | | | | | | | | | | |
| IBAN Account: | |  |  | | | |  | Intermediary Bank Swift Code (If Required): | | | | | | | | | |  |  | | | | | | | | | | | | | | | |

## Authorized Officer Information

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  |  | | | | |  |  |
|  |  | Last |  | First | | | | |  | Title |
|  |  |  |  |  | | | | |  |  |
|  |  |  |  |  | | | | |  |  |
|  |  | Signature | | |  |  |  | Date | | |

**The payment will be issued according to the currency in which they have been invoiced, if your bank account is in a different currency any exchange rate difference will be responsibility of the company to which the payment is being made.**