

# Oncor Electric Delivery Company LLC

Authorization for Direct Deposits (ACH Credits)

Please complete this form and return to:

Oncor Electric Delivery Company LLC  
Accounts Payable / Attn: ACH FORM  
P.O. Box 139070  
Dallas, Texas 75313

OR

Email / Fax / Phone  
[apinvoices@oncor.com](mailto:apinvoices@oncor.com)  
Phone - (214) 486-5386  
Fax - (214) 486-4922

## Your Company

Company Name: \_\_\_\_\_  
Invoice Remit To Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Company Tax ID #: \_\_\_\_\_  
Company Contact Name: \_\_\_\_\_  
Company Contact Telephone #: \_\_\_\_\_  
Your Oncor Contact Person: \_\_\_\_\_

By signing this form I authorize Oncor Electric Delivery to initiate ACH Credits to my bank account

\_\_\_\_\_  
Authorized Signature      Phone #      Date  
\_\_\_\_\_  
Printed Name      Title

Email Address for Payment Notifications: \_\_\_\_\_

Note: This authorization shall be governed by, and all EFT payments made hereunder shall be made in accordance with, the Corporate trade Payment Rules of the National Automated Clearing House Association (NACHA).

This authorization is to remain in full force and effect until Company has received written notification of its termination in such time and in such manner as to afford Company and Depository reasonable time to act upon it.

## Your ACH Receivable Bank

Bank Name: \_\_\_\_\_  
Bank Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Bank Contact Telephone #: \_\_\_\_\_  
Bank Account Name: \_\_\_\_\_  
Bank ACH Transit Routing  
(for ACH Payments): \_\_\_\_\_  
Bank Account Number: \_\_\_\_\_

IMPORTANT!! Please attach a voided check if available

For Internal Use Only  
Vendor Number \_\_\_\_\_  
Payment Method Code (CTX) \_\_\_\_\_  
Transaction Handling Code (THC) \_\_\_\_\_