

Payee Registration Form

(see reverse for instructions)

PAYEE #	
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Freedom of Information and Protection of Privacy

The personal information requested on this form is collected under the authority of section 31(c) of the *Freedom of Information and Protection of Privacy Act* R.S.P.E.I. 1988, Cap. F-15.01, and will be used for the purpose of administering payments to the individuals or suppliers that are identified on this form. This use includes the sharing of this information within the Government of Prince Edward Island and its agencies to update and ensure the accuracy of information for administering payments. Questions on the collection and use of this information can be directed to Payment Processing at (902) 368-4010.

 □ New Payee □ Update to Payee Information (i.e. address or updated banking) 								l banking)
Section A: Personal or Busi	ness Informatio	n						
Fill out this section as an individual OR for your business. All fields are required.								
For Individuals Only	•			•				
First Name	Full Middle Name(s)	Full Middle Name(s) Last Name			Prev	Previous Last Name(s)		
Date of Birth	Manager Provincial Co. 15 1							
	If you are a Provincial Government Employee:							
(DD/MM/YYYY)	Employee Number Department							
For Businesses Only								
Business Name (Legal name and oper	ating name if differe	nt)	HST	r/GST No).	Contact Person & Position		
For Individuals and Busines	ses							
Current Mailing Address		City			Province o	r State Postal Code or Zip Code		
_								•
Phone Number (including area code)	Email Address (for n	 	otails)	Email /	Address (for	nurchase	ordors if	different)
Frione Number (including area code)	Email Address (for p	ayment remittance u	etalisj	Liliali	Auul ess (loi	purchase	oruers ii	unierentj
Previous Mailing Addresses. Please pro		mailing addresses as	possible	. We use	this informa	ation to u	update ou	r records and to
prevent the duplication of your account								
Section B: Payment Informa	tion							
To receive payments from the Gove		ward Island you MII	ST nrov	ide vou	r hanking ir	formati	ion Failu	re to provide
		•	-	-	_		ion. i anu	re to provide
banking information will result in unprocessed and delayed payments. Please attach one of the following:								
☐ Void cheque								
Or ☐ Correspondence from Financial Institution (bank)								
Section C: Certification	n my own right or a	s the representative	o of the	compa	ny or hucin	oss nam	od in thi	form ontitled
I, as the person named in this form in my own right, or as the representative of the company or business named in this form entitled to receive payments from the Government of Prince Edward Island, hereby authorize the Government of Prince Edward Island or its								
agencies to share the information collected on this form with each other for the purposes of making a payment that is due. By								
providing banking information for e							-	•
of the company or business named								
authorize the Government of Princ								
account until further notice. If I am	the representative of	of the company or b	ousines	s name	d in this for	m, I hav	e the au	thority to bind
the company or business.								
Authorized Signature (Forms returned	without a signature	will not be process	ed)	Printed	Name (For I	Business	es Only)	Date
Sign Here X								
Section D: Additional Inform	ation							
Comment of the commen								
Section E. For Office Use	Only							
Section E: For Office Use								
BUSINESS UNIT: FIS	MEPS	LMDA		ISM		PSB		FLSB



Payee Registration Form Instructions

These instructions are provided to assist you in completing the Payee Registration Form which is required for payments from the Government of Prince Edward Island and its agencies using Government's financial accounting system.

For the purpose of this form a payee is the person or business that will be receiving a payment from the Government of Prince Edward Island or its agencies. The information requested on this form is collected and used only to facilitate the processing of these payments.

It is your responsibility to notify the Government of Prince Edward Island or its agencies of any changes to your information by completing a new Payee Registration Form.

Send the completed form to the mailing address, email address or fax number provided below. Failure to fully complete the form will result in delays.

Province of PEI Telephone: (902) 368-4010

Office of the Comptroller; Payment Processing Fax: (902) 368-6661

PO Box 2000 Email: pymtproc@gov.pe.ca

Charlottetown, PE C1A 7N8

Please follow the instructions below to ensure that the Payee Registration Form is properly completed.

Section A: Personal of Business Information				
For Individuals Only	Please provide your full legal name including your full middle name and all previous last names including married and/or maiden names. Middle and prior last names are used to update the Government's payee records. Date of Birth is required to ensure records are unique and that the wrong person is not paid.			
For Businesses Only	Please provide you legal business name and your operating name if different than your legal name. Please include a contact name that we can use if necessary to confirm, verify or obtain additional information. Please provide the 15 digit identifier provided by CRA. If you do not have a business number, please indicate "Not Applicable" in the box.			
For Individuals and Businesses	Please provide your complete mailing address, as well as any previous mailing addresses. Previous mailing addresses are used to update existing records and prevent the duplication of a payee's information. All electronic payments are accompanied with a remittance email with details of your payment (i.e. invoice numbers, amounts, dates) sent to the remittance email address provided. If a valid email address is not provided, you will not receive notification of an electronic payment.			

Section B: Payment Information

The Government of Prince Edward Island has moved to mandatory electronic payment service. Unless explicitly told otherwise all payees are required to attach either a void cheque or correspondence from their financial institution including their banking information. All payments made by the Government of Prince Edward Island and its agencies will be deposited to the bank account provided. Electronic payments are secure and reliable.

Section C: Certification

This section **must** be **read and signed** by the payee, or for a business, by an authorized delegate. If the Payee Registration Form is returned without a signature it will not be processed.

Section D: Additional Information

This section is used by the Government of Prince Edward Island and its agencies to capture additional information for some programs. A government employee will let you know if you are required to include any information in this section. If you have not received any direction to complete this section it can be left blank.

Section E: For Office Use Only

Please indicate the business unit from which this forms originates.