

**DIVISION OF WIC & COMMUNITY NUTRITION SERVICES
AUTHORIZATION FOR DIRECT DEPOSIT ACH & EBT SETTLEMENT**

All steps in this document must be completed before any authorized reimbursement.

I: Direct Deposit ACHpage 1

II: EBT Settlement Account Authorization.....page 2

STEP 1: Complete the Direct Deposit ACH information

(Please check only one box)

New Form

Correction/Change

VENDOR NUMBER _____

STORE NAME: _____

ADDRESS: _____

CITY, STATE _____

ZIP CODE: _____

TELEPHONE _____

CORPORATE CODE _____

(WIC Use Only for Consolidated ACH Do Not Complete)

I (we) hereby authorize the Commonwealth of Virginia - WIC Program, herein called the State Agency, to initiate credit entries to my (our) account. If funds to which I am not entitled to are deposited to my account, I (we) authorize the State Agency to direct the financial institution(s) to return said funds. These credit transactions should be made to the depository bank named below:

DEPOSITORY BANK NAME: _____

BRANCH: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ROUTING NUMBER: _____ **ACCOUNT NUMBER:** _____

BANK TELEPHONE NUMBER: _____

Please verify your routing and account number with your bank or corporate office before completing this section. Savings accounts are ineligible for ACH transactions.

This authorization is to remain in effect until the State Agency has received written notification from me of its change and/or termination. *Only the store manager, owner or an authorized agent should complete this form.

AUTHORIZED AGENT*
Please Print _____

SIGNATURE
Hand Written or Electronic _____

TITLE: _____ DATE: _____

STEP 2. Submit the completed page 1 Direct Deposit ACH information to:

By Email: wic_retailer@vdh.virginia.gov

By Mail: Virginia Department of Health
Division of Community Nutrition
109 Governor Street, 8th Floor
Richmond, VA 23219

By Fax: 804-864-7851

STEP 3. Complete the EBT Settlement Account Authorization

Check box for each task completed.

Check Box Task

Obtain the store's assigned Virginia WIC Vendor ID.

Contact Virginia WIC Retailer Help Desk by telephone at 1-877-436-6057

Provide the store's assigned Virginia WIC Vendor ID

Request a change to or a new ACH banking authorization information.

Request the following forms be sent to the stores authorized agent

- EBT Settlement Authorization form'
- W9 form

Request an email account or mailing address to return the forms.

Complete and return the forms by email or postal mail as instructed.

Contact Virginia WIC Retailer Help Desk to verify your account was updated.

Contact your assigned Virginia WIC Vendor Liaison for assistance in completing the form.
