



EA Engineering, Science, and Technology, Inc.
 225 Schilling Circle, Suite 400, Hunt Valley, MD 21031
 410-584-7000

Authorization Agreement for Electronic Transfer of Deposit

Section A – Vendor Information			
1. Type of Action a. <input type="checkbox"/> New b. <input type="checkbox"/> Change c. <input type="checkbox"/> Cancel	3. Vendor Legal Name 4. DBA (if applicable)		
2. Organization Type a. <input type="checkbox"/> Corporation b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Sole Proprietor d. <input type="checkbox"/> LLC	5. SSN/FEIN 6. Street Address 7. City 8. State 9. Zip		
10. Remit Street Address <i>(in case a paper check must be sent)</i>			
11. Remit City	12. Remit State	13. Remit Zip	14. Phone Number
15. Email address (where remit advice will be sent)			
<i>Note: Emails will be sent from eaalert@eaest.com. Please make sure this email is added to your safe senders list within your email system.</i>			

Section B – Banking Information
1. Type of Account <input type="checkbox"/> Checking <input type="checkbox"/> Savings
2. Bank Name
3. Bank Address
4. Bank Phone Number
5. Name on Bank Account
6. ABA Number
7. Account Number

I hereby authorize EA Engineering, Science, and Technology, Inc. to make payment of any amount owed to me by initiating credit entries or adjustment entries to the bank account indicated above. I authorize and request that the bank stated above to accept any credit entries or adjustment entries to such account and to enter the same to such account.

New banking information or changes to current information may take up to 14 days to go into effect.

Authorized Name (Printed): _____ Title: _____

Authorized Signature: _____ Date: _____

Please send completed forms to Vendor@eaest.com or Fax to 410-771-1625.
Note: Incomplete forms will not be processed!