



Hennepin County Office of Budget & Finance

Accounts Payable Section

Direct Deposit (Automated Clearinghouse or ACH) Enrollment

Complete this form and return it to: Hennepin County - Accounts Payable
 Government Center MC 131
 OBF.Internet@hennepin.us OR 300 South 6th Street
 Minneapolis MN 55487-0131

Payee Name

Address

City / State / Zip Code

Area Code & Phone Number

E-mail Address for Remittance Advice

New direct deposit Enrollment
 - Or -

Account Change - Required:

Routing # to remove _____ Account # to remove _____

To enroll in the direct deposit (ACH) program, you must provide your bank account information. You may decline to enroll in the direct deposit (ACH) program, in which case you will receive any payment by check. By providing your bank account information, you authorize Hennepin County (the county) to verify the information with your bank, the county's bank and with other third parties engaged by the county for purposes of verifying account ownership. The county reserves the right to make payment by check at any time for any reason. By signing this form, you authorize the county to make electronic ACH credit entries to the account you provided for the purpose of receiving payment for billed goods or services, and, if necessary, make debit entries to or returns of any credit entries in error. Remittance information for payments made by ACH transaction will be provided only via email.

Type of account:

Checking – Enclose a *voided* blank check (preferred) or print the account and routing numbers legibly below.

Savings – Print the account and routing numbers legibly below

Financial Institution

Account Number at Financial Institution (not needed if enclosing a voided blank check)

Transit Routing Number (ABA)

(not needed if enclosing a voided blank check) :

I:

--	--	--	--	--	--	--	--	--

 I:

Authorized By – Print Name

Title

Authorized Signature

HENNEPIN COUNTY CONTRACTOR AFFIRMATIVE ACTION (AA) CLASSIFICATION

The information requested below is used internally by Hennepin County to monitor and report on participation in county contracting. Your cooperation in completing this form is greatly appreciated. Vendors who do not complete this information may be contacted by Hennepin County to provide the information requested. If you have questions completing this side of the form, please call: (612) 348-3181.

1) Company type - check one:

- Publicly held company¹
 - Non-profit entity
 - Government entity
 - Other
- } If you chose one of these, **STOP HERE.**
- } If you chose "Other" please answer all remaining questions.

2) Are you a small business certified by the CERT Program²?

- Yes
- No

3) Check one:

- Veteran-Owned Business certified by the MnDOA³
- Service Disabled Veteran-Owned Business certified by the MnDOA³
- NOT a MnDOA³ certified Veteran-Owned Business

4) Check one gender of majority owner:

- Male
- Female
- Nonconforming

5) Check one ethnicity/race of majority owner⁴:

- Black/African American
- Hispanic
- Asian or Pacific Islander
- American Indian or Alaskan Native
- White/Caucasian

¹ **A Publicly Held Company** is a company whose stock is traded on the open market.

² **Small Business Enterprise Certification:**

While certification is not necessary to do business with Hennepin County, only CERT certified businesses can be counted toward the goal for Small Business Enterprise (SBE) participation in county contracting. Certification also boosts market exposure and qualifies businesses to access SBE program services. For further information about certification, please call 651-266-8900 or visit the Central Certification (CERT) Program's website at: <https://cert.smwbe.com/>

³ **Veteran-Owned Business Certification:**

While certification is not necessary to do business with Hennepin County, only the participation of businesses recognized as certified by the State of Minnesota Department of Administration can be counted as a Veteran-Owned Business (VOB) or Service Disabled Veteran-Owned Business (SDVOB) for county purposes. For further information about certification and advantages thereof, please contact the Office of Equity and Procurement (OEP) at: [\(651\) 296-2600](tel:6512962600) or visit: <https://mn.gov/admin/business/vendor-info/oep/sbcp/>

⁴ **Ethnicity and Racial Group Definitions:**

Black/African American: All persons having origins in any of the Black racial groups of Africa.

Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American descent or other Spanish culture of origin, regardless of race.

Asian or Pacific Islander: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Sub-continent or the Pacific Islands, including, for example, China, Japan, Korea, Hawaii, Guam, the Philippine Islands and Samoa.

American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America, and who maintain tribal affiliation or community attachment.

White/Caucasian: All persons with origins in any of the original peoples of Europe, North Africa or the Middle East.