



**REQUEST FOR ACH ELECTRONIC FUNDS TRANSFER**  
**THIS FORM IS FOR U.S. ACCOUNTS ONLY**  
All Information Is Required

VENDOR # ON CHECK: \_\_\_\_\_

VENDOR NAME: \_\_\_\_\_

VENDOR TAX ID NUMBER \_\_\_\_\_

REMIT TO E-MAIL ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

REMIT TO FAX NUMBER: \_\_\_\_\_

BANK NAME: \_\_\_\_\_

BANK ADDRESS: \_\_\_\_\_

ABA or ROUTING NUMBER:  
( 9 Digits) \_\_\_\_\_

ACCOUNT NAME: \_\_\_\_\_

ACCOUNT TYPE \_\_\_\_\_

(select only one): Savings \_\_\_\_\_ Checking \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

ALL POSSIBLE REMIT TO  
ADDRESSES: \_\_\_\_\_

**Once you start receiving EFT payments, you will be eligible to access our website for account information such as open invoices and paid invoices with payment numbers. Please access our website at <http://extranet.metaldyne.com>, click on the portal logon box to establish a new account. Complete the form for suppliers to view the website.**

Authorized Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

For inquires, contact AP at 734-207-6200  
**Please fax your completed form to  
Accounts Payables: 734-207-6743**