



REQUEST FOR DIRECT DEPOSIT IN CANADA

Our Direct Deposit program is available to anyone who receives benefit payments. To avoid delay in delivery of these benefits, please complete and return this form to:

CLAIMS CALL CENTRE
Phone 604 231-8888
Toll-free 1 888 967-5377
M–F, 8:00 a.m. to 4:30 p.m.

FAX
604 233-9777
Toll-free **1 888 922-8807**

MAIL
WorkSafeBC
PO Box 4700 Stn Terminal
Vancouver BC V6B 1J1

Identification section

Applicant last name	Applicant first name	Middle initial	WorkSafeBC claim number
Applicant current address		Applicant e-mail address	

To start or change direct deposit	Start direct deposit <input type="checkbox"/>	Change direct deposit <input type="checkbox"/>
--	---	--

In order to use our Direct Deposit program, the following information is required:

1. Your name must appear on the account.
2. The account number you have provided is with a branch of a Canadian financial institution, located in Canada (i.e., cannot be an off-shore account)
3. Include a sample “voided” cheque **OR** have a representative from the branch that you deal with complete, sign, and stamp this form in the space below.

Direct deposit information

— *This banking information will be used for all current and future claims unless otherwise advised.* —

Financial institution information		For Bank/Trust Company/Credit Union: Please stamp here	
Institution ID number (3-digit minimum)			
Transit ID number (5-digit minimum)			
Account number (7-digit minimum)			
Address			
City	Postal code	Initials	Date (yyyy-mm-dd)

My signature on this document authorizes WorkSafeBC to make changes as noted above and to obtain current address information at any time from the branch of the financial institution where my direct deposit is made.

Applicant's signature	Date (yyyy-mm-dd)	Applicant's phone number
-----------------------	-------------------	--------------------------

Personal information on this form is collected for the purposes of administering a worker's compensation claim by WorkSafeBC in accordance with the *Workers Compensation Act* and the *Freedom of Information and Protection of Privacy Act*. For further information about the collection of personal information, please contact WorkSafeBC's Freedom of Information Coordinator at PO Box 2310 Stn Terminal, Vancouver BC, V6B 3W5, or telephone 604 279-8171.

