



DIRECT DEPOSIT FORM

As of July 1, 2025, NHP will pay our vendors and providers via ACH (Automated Clearing House). ACH allows for quicker payment processing; otherwise, payments will follow internal procedures and standard mailing timelines, which may not offer the same level of expediency.

Please include a W9 Form with the completed Director Deposit Form to NHP's Accounts Payable via email at ap@nhpllc.org

COMPANY BANK INFORMATION

BANK NAME: _____

BANK ADDRESS:

Street _____

Suite/Unit _____

City _____

State _____

ZIP _____

BANK ACCOUNT TYPE: ☐ Checking ☐ Savings

BANK ACCOUNT NO: _____ BANK ROUTING NO FOR ACH: _____

COMPANY INFORMATION

COMPANY NAME (as it appears on the bank account): _____

DBA (as it appears in NHP Contract, if different): _____

COMPANY TAX ID (associated with the bank account): _____

Finance Contact Information – Primary contact to receive Payment Remittance Advice (Limited to One Individual by Company)

FULL NAME: _____

TITLE: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____

The information provided will be used to remit payment. We will never debit your account without prior authorization.