

Section J
Bank Account Information

Date	Application # <i>[NYISO use only]</i>	MIS Org ID <i>[NYISO use only]</i>	Date Received <i>[NYISO use only]</i>
Applicant Name			

BANK ACCOUNT INFORMATION

Financial Institution			
Address Line 1			
Address Line 2			
City		State/ Province	
Zip Code		Country	
ABA #		Account Number	

AUTHORIZED SIGNATURES FOR BANK INFORMATION

First Banking Contact **(REQUIRED)**

First Name		Last Name	
Title			
Primary Phone		Secondary Phone	
E-mail Address			
Signature		Date	

Second Banking Contact **(REQUIRED)**

First Name		Last Name	
Title			
Primary Phone		Secondary Phone	
E-mail Address			
Signature		Date	

Any changes to bank account information must be submitted to the NYISO in writing under the signatures of the individuals designated above.

*Please note: The second banking contact must have a different e-mail address to comply with the NYISO's dual-verification procedures. If your company does not have a second banking contact, with a distinct e-mail address, you may provide the NYISO with written documentation, on company letterhead, stating that the company has only one primary banking contact, and as such, that contact is authorized to independently verify the company's banking instructions.