

Electronic Pay Statement Authorization Form

This form must be completed and signed by the employee in order to authorize electronic pay statements, which will be delivered bi-weekly via e-mail to the address indicated below. **Submit completed form to Payroll for processing.** An online version of this form is available at: http://citywire.city.vancouver.bc.ca/epay

Employee							
First Name:							
Last Name:							
Contact Phone: ()	-	Ext.				
Personnel Number:		(if available)	Birth Date:				
Department			Ν	1	Μ	D	D
Business Planning	EEO Program	Fire	Library		🗌 Pa	rk Boa	rd
City Clerk's	Engineering	Human Resources	Mayor & City Council		🗌 Po	lice	
Community Services	Financial Services	Law	Office of the City Manager				

If you are subscribed to electronic pay statements and wish to change your delivery to a different e-mail address, please indicate the e-mail you currently use for your electronic pay statement.

Current E-mail:

Select Delivery E-Mail Address

Option 1: Deliver pay statements to my personal e-mail account. I have read and agree to the waiver statement below.

Personal E-mail:

Privacy/Consent: To assist in protecting my privacy, I acknowledge that the City will (i) encrypt my ePay statements, (ii) will not disclose my personal e-mail address to third parties, and (iii) will only use my personal e-mail address for the purpose of sending ePay statements to me. By signing this form, I consent to the City sending my ePay statements to my personal e-mail account on this basis.

Option 2: Deliver pay statements to my work e-mail account.

Work E-mail:

Note: To obtain your ePay password, contact the IT Help Centre at 604-873-7127 (open from 7 am - 10:30 pm daily).

Employee (signature)				Date			
Office Use Only							
Processed By:		Date:		For Pay Period:			