

ACH VENDOR PAYMENT AUTHORIZATION FORM

This form is used for electronic payments processed through the Automated Clearing House (ACH). Norfolk Southern Corporation (NS) uses this information to transmit payment data electronically to your financial institution. Failure to provide the requested information may delay or prevent the receipt of payment through ACH. Additionally, NS uses third-party bank validations to verify account ownership. Bank validation failures require a callback confirmation and additional documentation such as a voided check or signed bank letter confirming your account.

Both sections below must be completed by vendor.

VENDOR INFORMATION:	
*NS ISSUED VENDOR NUMBER (existing vendors only):	
(Can be found on prior payment remittances)	
*VENDOR NAME: (Vendor Name must be an exact match to what is listed on your W-9)
*REMITTANCE ADDRESS:	
*REMITTANCE CITY: REMITTANCE STATE:	REMITTANCE ZIPCODE:
*REMITTANCE CONTACT NAME: *REMITTAN	CE CONTACT PHONE #:
*REMITTANCE CONTACT EMAIL:	
*CONVENIENT DAY(S) AND TIME(S) FOR CALLBACK	
AUTHORIZED BY (PRINT NAME): SIGNATURE:	TITLE: DATE:
None Mark Control of the Control of	e. Sm.
FINANCIAL INSTITUTION INFORMATION:	
*REQUEST TYPE: NEW ACH SETUP UPDATE EXISTING ACH	YOUR NAME 123 1234 Main Street Anywhere, OH 00000 DATE
*DANIZAIANE	PAY TO THE SOUTH ONLY OF THE ODULARS
*BANK NAME:	(1044072324 (1000123456789 11123
*(9) DIGIT ROUTING NUMBER:	ROUTING ACCOUNT CHECK NUMBER NUMBER NUMBER
*DEPOSITOR ACCOUNT NUMBER:	
*ACCOUNT TYPE: CHECKING SAVINGS	
*REMITTANCE DETAIL (CHOSE ONLY ONE):	
\square SENT BY VENDOR BANK THROUGH THE METHOD(S) SELECTED (KNOWN AS CTX).	
SENT BY NORFOLK SOUTHERN EMAIL (KNOWN AS CCD+).	

Questions regarding this form should be directed to the Accounts Payable Department via <u>APElectronicPayments@nscorp.com</u>