



## FACILITIES & SERVICES

### CUSTOMER ACCOUNT REQUEST / CHANGE FORM (F&S ACCOUNTS ONLY)

*NOTE: This document authorizes Facilities & Services to charge SAP-FIS account noted below for goods & services provided. Details of F&S billing can be displayed using SAP - F&S Customer Statement. The transaction code is "ZFVR019A".*

**Finance & Administration  
Facilities and Services Department  
University of Toronto**

255 McCaul Street, Level 4, Toronto, ON, M5T 1W7  
T/P: (416) 946-5985. Fax: (416) 978-3920  
Email: arfacilities.services@utoronto.ca

**Request for:** New Customer A/C

D	D	M	M	Y	Y

**Change to A/C Info**

(Enter the existing customer # below)

**Customer Number:**

**F&S CUSTOMER INFORMATION** (For A/C Changes, please enter the revised information)

Account Name: \_\_\_\_\_

(Enter Project Name/Details)

Dept: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Building #: \_\_\_\_\_ Bldg Name: \_\_\_\_\_

(If applicable, enter Building details relating to the project)

**F&S Customer Category**

- Asbestos
  - AODA
  - DM - VFA
  - DM - Contingency
  - DM - Opportunistic
  - UIRF
  - URRF
  - F&S - Operating
  - F&S - Others (Please Specify)
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**ACCOUNTING INFORMATION** (For A/C Changes, please enter the revised information)

GL Account #:

Cost Centre:  or Internal Order/  
Project Number:

Fund Centre:  Fund:

**AUTHORIZED APPROVAL**

<b>Name of Authorized Person</b>	<b>Title</b>	<b>Date (dd/mm/yy)</b>	<b>Signature</b>
<b>Name of Authorized Person</b>	<b>Title</b>	<b>Date (dd/mm/yy)</b>	<b>Signature</b>
<small>(second signature if required)</small>			