

Employee Authorization Agreement for Direct Deposit

Complete this form and give it to your employer to sign up for direct deposit payroll. To set up new account(s):

1. The bank account must be established and active at your bank before you request direct deposit payroll.
2. Confirm your bank accepts direct deposits and notify your bank that you will receive direct deposit payroll.
3. Verify the routing and account numbers for each bank account with your bank.
4. For savings accounts, you must confirm the transit routing number with your bank (it may be different).

To change an existing account, check the applicable box and enter the account information for your employer to verify.

Account 1			
<input type="checkbox"/> Add Account		<input type="checkbox"/> Change Account Distribution	
<input type="checkbox"/> Add Account		<input type="checkbox"/> Cancel Account	
Bank Name		<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	
Routing Number		Account Number	
Distribution (specify one)	Percent: %	Fixed Amount: \$	Remainder ()
Account 2			
<input type="checkbox"/> Add Account		<input type="checkbox"/> Change Account Distribution	
<input type="checkbox"/> Add Account		<input type="checkbox"/> Cancel Account	
Bank Name		<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	
Routing Number		Account Number	
Distribution (specify one)	Percent: %	Fixed Amount: \$	Remainder ()
Account 3			
<input type="checkbox"/> Add Account		<input type="checkbox"/> Change Account Distribution	
<input type="checkbox"/> Add Account		<input type="checkbox"/> Cancel Account	
Bank Name		<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	
Routing Number		Account Number	
Distribution (specify one)	Percent: %	Fixed Amount: \$	Remainder ()
Account 4			
<input type="checkbox"/> Add Account		<input type="checkbox"/> Change Account Distribution	
<input type="checkbox"/> Add Account		<input type="checkbox"/> Cancel Account	
Bank Name		<input type="checkbox"/> Checking Account <input type="checkbox"/> Savings Account	
Routing Number		Account Number	
Distribution (specify one)	Percent: %	Fixed Amount: \$	Remainder ()
Employee Name		Social Security Number (required)	

- I authorize my employer and the bank(s) listed on this form to deposit my payroll as indicated into my account(s) each pay day.
- If funds to which I am not entitled are deposited into my account, I authorize my employer to direct the bank to return said funds to my employer.
- I understand that my payroll may not be deposited into my account until 5:00 p.m. on the date indicated on my direct deposit payroll voucher.
- I understand that new bank accounts may take up to two payroll cycles to become active for direct deposit payroll.

Employee Signature

Date