

# Employee Authorization For Direct Deposit

**How To Enroll For Direct Deposit?**

Please read and complete this form to initiate automatic direct deposit for your entire payroll check or a portion of your net pay.

**When Does Direct Deposit Start?**

Approximately 1 week after your form has been received and processed.

**Please Remember The Following When Signing Up For Direct Deposit:**

1. In accordance with the Federal Reserve Policy, Direct Deposits may take up to 48 business hours to be posted to your account. **It is your responsibility to verify funds prior to writing checks against your account.**
2. Direct deposit items are processed using the routing number from your voided check. However, some financial Institutions require a different number for electronic transmissions. If your financial institution is a savings and loan, credit union, or you wish to deposit into a savings account, **please verify with your Financial Institution that the routing number on your deposit slip is the same number we should use for electronic transmissions.**
3. Financial Institutions may post electronic transactions at different times. Please check with your Financial Institution to determine what time they post electronic transactions before trying to access your balance.
4. For your first initial payroll deposit, call your Financial Institution to confirm that your direct deposit(s) have been posted properly.

**EMPLOYEE INFORMATION:**

Employee Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Home Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Company Name \_\_\_\_\_ Client Number \_\_\_\_\_

**Each payday, deposit my payroll into the following accounts:**

| Type of Account | \$ Amount or % | Financial Institution | Account Number | Routing Number |
|-----------------|----------------|-----------------------|----------------|----------------|
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Attach a copy of a personal VOIDED check from all Accounts you wish to be directly deposited.

I hereby authorize my employer and their agents including Intercept Corporation (IC) and PrimePay to initiate electronic deposits and/or withdrawals to the bank account(s) shown above. I understand that adjustment and/or reversing entries may be made to this account to insure an accurate and balanced accounting of all transactions. This authority will remain in effect until I have given written notice of its termination, or until Employer or my financial institution has given me 10 days notice that this direct deposit will be terminated. I understand that I must give advance notice to allow reasonable time for my instructions to be executed. If ever an incorrect amount should be entered into my account, I direct and authorize my financial institution and Employer to make the appropriate adjustment.

Signature \_\_\_\_\_ Date \_\_\_\_\_