

DIRECT DEPOSIT AUTHORIZATION



This form must be completed for Direct Deposit.

You must:

- A. Already have the (checking or savings) account set up at your bank.
- B. Confirm your bank accepts direct deposits. Verify the bank's transit/routing number and your account number (including dashes).
- C. Notify your bank that you are planning to set up direct deposit through payroll. Inform the Finance Department of any unique requirements of your bank.

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Please check the appropriate box:

- A new account (complete A through E below).
- Canceling account (complete item C below). Do not close an account unless you cancel it through payroll first.
- Direct deposit already set up; changing \$ amount only (complete C through E below).
- A new account to replace a direct deposit already set up (complete A through E below).

Old account number (account being replaced). — — — — —

|                            | Account # 1                                                           | Account # 2                                                           | Account # 3                                                           |
|----------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|
| A. Bank Name               | _____                                                                 | _____                                                                 | _____                                                                 |
| B. Bank Transit/Routing#:  | _____                                                                 | _____                                                                 | _____                                                                 |
| C. Bank Account #:         | _____                                                                 | _____                                                                 | _____                                                                 |
|                            | Checking <input type="checkbox"/> or Savings <input type="checkbox"/> | Checking <input type="checkbox"/> or Savings <input type="checkbox"/> | Checking <input type="checkbox"/> or Savings <input type="checkbox"/> |
| D. Full Deposit of net pay | <input type="checkbox"/>                                              |                                                                       |                                                                       |
| E. Fixed amount per pay    | \$ _____                                                              | \$ _____                                                              | \$ _____                                                              |

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- I authorize the Town of Suffield and the bank listed above to deposit my net pay or fixed amount thereof as indicated above into my account each pay day.
  - If funds to which I am not entitled are deposited into my account, I authorize the Town of Suffield to direct the bank to return said funds.
  - I understand that my deposit will be credited on the pay date indicated on the check voucher (anticipating no unforeseen delay in the electronic transfer process).
  - I understand that it is my responsibility to ensure that my wages are deposited correctly into my account each pay date.
  - I authorize the town to send my direct deposit advice to the following email (advices are sent password protected):

\_\_\_\_\_

\_\_\_\_\_

Print Employee Name

\_\_\_\_\_

Employee Signature

\_\_\_\_\_

Date

It will take about two to three weeks to verify and test the account number information, as required by the FDIC.