

**Employee Direct Deposit Application**

**Employee Instructions:**

1. Complete the Employee information section
2. Complete the Direct Deposit section to specify where you want your pay deposited.
3. Sign the bottom of the form.
4. Retain a copy of this form. Return the original to your employer along with a copy of a **voided check.** Please **do not** send deposit tickets as they often do not have the required information. If this is a **savings** account, please obtain from your bank a letter stating the routing and account number.

**Employee Information**

*Please print*

Employee Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security # \_\_\_\_\_-\_\_\_-\_\_\_\_\_\_\_

**Employer Information**

**\_\_\_\_\_\_Date entered for employee net pay detail**

**Banking Information**

*I would like my wages/salary deposited to the following bank account(s):*

**Checking**

□ Checking

 Bank Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Attach a void check, bank letter, or specification sheet.*

***Deposit tickets not accepted)***

I wish to deposit (check one):

□ Entire Net Pay

□ \_\_\_\_\_\_% of Net Pay

□ $\_\_\_\_.\_\_ (specific dollar amount)

**Savings**

□ Savings

 Bank Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Attach only a bank letter or specification sheet.*

***Deposit tickets not accepted)***

I wish to deposit (check one):

□ Entire Net Pay

□ \_\_\_\_\_\_% of Net Pay

□ $\_\_\_\_.\_\_ (specific dollar amount)

*I hereby authorize my employer, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to deposit any amounts owed me by initiating credit entries to my account at the financial institution indicated above. Further, I authorize my bank to accept and to credit any credit entries indicated by my employer to my account. In the event that my employer deposits funds erroneously into my account, I authorize my employer to debit my account for an amount not to exceed the original amount of the erroneous credit.*

 *For my convenience, I request that Integrated Payroll Services (IPS) directly deposit my wages/salary earned from my employer, into my bank account. I understand that deposit of my earnings into my account by IPS may be an advance of funds on behalf of my employer, which is subject to the successful collection of these funds by IPS from my employer’s bank. If, within 30 days of IPS making the deposit into my account, my employer does not make available to IPS the funds that were advanced to make the deposit into my account, I authorize IPS to charge my account to recover said advance, I agree to hold IPS harmless from loss and to indemnity it, limited to the amount of the deposit.*

 *This authorization is to remain in full force and effect until my employer and financial institution have received written notice from me of its termination in such time and in such manner as to afford my employer and bank a reasonable opportunity to act on it.*

Employee Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_/\_\_/\_\_\_\_