

DIRECT DEPOSIT AUTHORIZATION AND AGREEMENT

CONFIDENTIAL

I authorize the Charter Township of Redford to make deposits from my net pay to the following account(s):
Re-list all previous accounts you want to keep active and add any new ones
Deposits will be made in the order listed

1. The Charter Township of Redford is hereby authorized to direct deposit:
of my net pay into:
Depository Financial Institution (Bank Name):
Routing and Transit Number Account Number Checking or Savings

2. The Charter Township of Redford is further authorized to direct deposit:
of my net pay into:
Depository Financial Institution (Bank Name):
Routing and Transit Number Account Number Checking or Savings

3. The Charter Township of Redford is also further authorized to direct deposit:
of my net pay into:
Depository Financial Institution (Bank Name):
Routing and Transit Number Account Number Checking or Savings

4. The Charter Township of Redford is also further authorized to direct deposit:
of my net pay into:
Depository Financial Institution (Bank Name):
Routing and Transit Number Account Number Checking or Savings

I understand that any net pay amount in excess of that directly deposited into my bank account(s) will be issued to me on a Township payroll check.
I authorize the Depository Financial Institutions listed above to accept these deposits. I also understand that adjusting entries may be made to correct any errors in the deposits. It is agreed that these deposits and adjustments may be made electronically and are bound by the rules of the Michigan Automated Clearing House Association.
This authorization is to remain in effect until I provide a written notice of termination to the Charter Township of Redford by either a new form or a separate cancellation letter.
The Charter Township of Redford cannot guarantee that direct deposit will be available each pay period due to circumstances that could arise beyond our control. In that case, a traditional paycheck will be issued.

Date

Print Name

Retiree ID Number (for office use)

Address

Signature

City, State, Zip

If this is a "change" list the changed bank/\$ amount and relist any previous ones you wish to continue as this new form will be the only direct deposit(s) made. Money amounts are monthly amounts.
If changes are needed, please submit a new form to Payroll. For changes in amounts only, a minimum 1 month notice is necessary. For changes in financial institutions, a minimum 2 month notice is required. Changes are limited to four (4) times in a fiscal year.
8/07 revised