

# City of Satellite Beach Employee Direct Deposit Enrollment Form

PRENOTE:  
PR PD \_\_\_\_\_  
FB Prog \_\_\_\_\_  
Roster \_\_\_\_\_  
Book \_\_\_\_\_  
  
DRAFT:  
FB Prog \_\_\_\_\_  
Roster \_\_\_\_\_  
Book \_\_\_\_\_  
  
By \_\_\_\_\_

**Important! Please read and sign before completing and submitting.**

I hereby authorize my employer (hereinafter "Company") to deposit any amounts owed me by initiating credit entries to my accounts at the financial institutions (hereinafter "Bank") indicated on this form. Further, I authorize Bank to accept and to credit any credit entries indicated by Company to my accounts. In the event that Company deposits funds erroneously into my account, I authorize Company to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until company and Bank have received written notice from me of its termination in such time and in such manner as to afford Company and Bank reasonable opportunity to at on it.

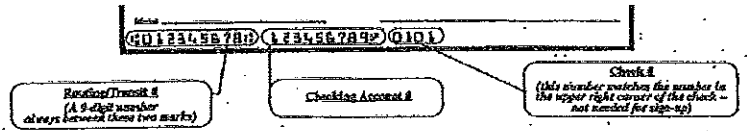
I further understand that the first payroll under which this authorization applies will be a zero transaction (Prenote) and I will receive a normal paycheck. The following payroll, if all accounts are active and available, will receive the direct deposit (Draft) to my account as requested.

Employee Name: \_\_\_\_\_ Employee ID \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To enroll in Full Service Direct Deposit (FSDD) simply fill out this form and return it to the City of Satellite Beach Finance Department. Attach a voided check for each checking account - **not a deposit slip**. If depositing to a savings account, ask your bank to give you the routing/Transit Number for your account. It isn't always the same as the number on the savings deposit slip. This will ensure proper routing of your deposit.

Below is a sample check MICR line, detailing where the information necessary to complete this form can be found.



### Account Information

If you wish to have your full net pay direct deposited into your account, the last item must be for the remaining amount owed to you. To distribute to more accounts, please complete another form. Make sure to indicate what kind of account, along with amount to be deposited if less than your total paycheck.

1. Bank Name/City/State: _____	Bank Code: _____
Routing/Transit #: _____	Account Number: _____
<input type="checkbox"/> Check <input type="checkbox"/> Savings <input type="checkbox"/> Other	I wish to deposit: \$ _____ or <input type="checkbox"/> Entire Net Amount
2. Bank Name/City/State: _____	Bank Code: _____
Routing/Transit #: _____	Account Number: _____
<input type="checkbox"/> Check <input type="checkbox"/> Savings <input type="checkbox"/> Other	I wish to deposit: \$ _____ or <input type="checkbox"/> Entire Net Amount
3. Bank Name/City/State: _____	Bank Code: _____
Routing/Transit #: _____	Account Number: _____
<input type="checkbox"/> Check <input type="checkbox"/> Savings <input type="checkbox"/> Other	I wish to deposit: \$ _____ or <input type="checkbox"/> Entire Net Amount