PREMIER PAYROLL SERVICES
290 Main Street Royersford, PA 19468
610-917-2281 · support@premiernow.com

Direct Deposit Form

Employee Name: _____ **Employee SSN:** _____

I hereby authorize my employer _____ to initiate credit entries and, if necessary, debit entries and adjustments to my account or accounts listed below in the event of an erroneous deposit by my Employer. Premier Payroll Services, Inc. and its agents, including Intercept Corporation, will directly deposit my wages earned from my employer into my bank account. I understand that deposit of my earnings into my account by Premier Payroll Services, Inc. and its agents may be an advance of funds on behalf of my Employer, which is subject to the successful collection of these funds by Premier Payroll Services, Inc. and its agents from my employer's bank. If, within 30 days, my Employer does not make available to Premier Payroll Services, Inc. and its agents the funds that were advanced to make the deposit into my account, I authorize Premier Payroll Services, Inc. and its agents to charge my account to recover said advance. I also authorize Premier Payroll Services, Inc. and its agents to debit my account if an amount of money was transferred to my account by mistake. I agree to hold Premier Payroll Services, Inc. and its agents harmless from loss and to indemnify it, limited to the amount of deposit. This authorization is to remain in full force and effect until my Employer has received written notification from me of its termination in such time and manner as to afford my Employer a reasonable opportunity to act on it.

Date: _____ **Employee Signature:** _____

Please complete the following information for the bank account(s) in which you wish to receive direct deposit.
Voided checks are not required, but help ensure direct deposit right away as verification of correct routing and account number. Bank generated forms are acceptable as proof.

Bank Account #1

*Attach copy of voided check

Name of Bank or Credit Union:	Type:	Amount:
	☐ Checking	_____ Percent of Net Pay Amount OR
Routing and Transit Number:		_____ Fixed Amount
	☐ Savings	_____ Percent of Net Pay Amount OR
Account Number:		_____ Fixed Amount

Bank Account #2

*Attach copy of voided check

Name of Bank or Credit Union:	Type:	Amount:
	☐ Checking	_____ Percent of Net Pay Amount OR
Routing and Transit Number:		_____ Fixed Amount
	☐ Savings	_____ Percent of Net Pay Amount OR
Account Number:		_____ Fixed Amount

Bank Account #3

*Attach copy of voided check

Name of Bank or Credit Union:	Type:	Amount:
	☐ Checking	_____ Percent of Net Pay Amount OR
Routing and Transit Number:		_____ Fixed Amount
	☐ Savings	_____ Percent of Net Pay Amount OR
Account Number:		_____ Fixed Amount