Borough of Rumson

BOROUGH HALL
80 East River Road
Rumson, New Jersey 07760-1689

office 732.842.3300
fax 732.219.0714

EMPLOYEE DIRECT DEPOSIT ENROLLMENT FORM

IMPORTANT! Please read and sign before completing and submitting.

I hereby authorize my employer (hereinafter "Borough") to deposit any amounts owed me by initiating credit entries to my accounts at the financial institution(s) (hereinafter "Bank(s)") indicated on this form. Further, I authorize Bank(s) to accept and to credit any credit entries indicated by Borough to my accounts. In the event that Borough deposits funds erroneously into my account, I authorize Borough 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 Borough and Bank have received written notice from me of its termination in such time and in such manner as to afford Borough and Bank reasonable opportunity to act on it.

Name: _____ SSN: _____

Signature: _____ Date: _____

Address: _____ Phone: _____

ACCOUNT INFORMATION

Make sure to indicate the TYPE of account and the amount to be deposited if less than your total net pay. You must **include a "VOID" check** for a Checking Account or a Letter from your bank for a Savings Account. If you are distributing your pay between two or more accounts, the last account listed will be the remaining net pay owed to you, if any. For more than two accounts, please use additional form.

1. Bank Name/City/State: _____

Routing/Transit #: _____ Account #: _____

Account Type: _____ Checking _____ Savings _____ Other

I wish to deposit: _____ OR _____ Entire Net Amount

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2. Bank Name/City/State: _____

Routing/Transit #: _____ Account #: _____

Account Type: _____ Checking _____ Savings _____ Other

I wish to deposit: $_____ OR _____ Entire Net Amount

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3. Bank Name/City/State: _____

Routing/Transit #: _____ Account #: _____

Account Type: _____ Checking _____ Savings _____ Other

I wish to deposit: $_____ OR _____ Entire Net Amount