

DIRECT DEPOSIT AUTHORIZATION FORM

Give the completed form to your employer, HR department or payer, in person or through a secure portal: it contains your account number. Use the routing number your bank gives for direct deposit (ACH), not a wire or internal number.

EMPLOYEE / PAYEE INFORMATION

Full legal name: _____
Employee or vendor ID: _____ Last 4 digits of SSN or EIN: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Email: _____

TYPE OF REQUEST

☐ New authorization ☐ Change (replaces all earlier instructions) ☐ Cancel direct deposit

BANK ACCOUNT 1

Bank or credit union name: _____
Routing number (9 digits): _____ Account number: _____
Account type: ☐ Checking ☐ Savings
Amount: ☐ Entire net pay ☐ \$_____ per pay period ☐ _____% of net pay

BANK ACCOUNT 2 (OPTIONAL)

Bank or credit union name: _____
Routing number (9 digits): _____ Account number: _____
Account type: ☐ Checking ☐ Savings
Amount: ☐ \$_____ per pay period ☐ _____% of net pay ☐ Remainder after the accounts above

BANK ACCOUNT 3 (OPTIONAL)

Bank or credit union name: _____
Routing number (9 digits): _____ Account number: _____
Account type: ☐ Checking ☐ Savings
Amount: ☐ \$_____ per pay period ☐ _____% of net pay ☐ Remainder after the accounts above

VERIFICATION (attach one for each account)

☐ Voided check ☐ Direct deposit letter or form from my bank

AUTHORIZATION

I authorize _____ (the "Payer") to deposit my pay or other payments electronically to the account(s) above and, if a deposit is made in error, to reverse only the amount deposited in error.

This authorization stays in effect until I cancel or change it in writing. I may cancel it at any time; the Payer will switch the payment method after it processes my request.

I certify that the information above is correct and that I own, or am authorized to use, each account.

☐ I received the employer's written notice of my wage payment options and the direct deposit terms before signing (required in New York).

Signature: _____ Date: _____

Printed name: _____

FOR THE PAYER (optional)

Received by: _____ Date entered: _____

Verified: ☐ Yes

New York employers: an employee's written consent is required before paying wages by direct deposit, the employee may withdraw it at any time, and the change of payment method must be finalized within two pay periods (New York State Department of Labor; exceptions for some highly paid exempt employees and farm workers). Federal Regulation E (12 CFR 1005.10(e)(2)) bars requiring an account at a particular institution as a condition of employment. Read October 14, 2026. This template is general information, not legal advice. LegalTemplateVault.com is not a law firm.