



Blount County Government DIRECT DEPOSIT FORM

NAME: _____

JOB SITE: _____

ID#: _____

WORK PHONE: _____

Direct Deposit will begin approximately 2 pay periods after we have received your completed form and information. When initiating direct deposit or making an account number change, a **valid document must be provided** (voided check, deposit slip, bank letter, etc.).

- I wish to have the net amount of my check direct deposited
- I wish to change the account of my direct deposit
- I wish to change the allocation of my direct deposit
- I wish to STOP my direct deposit

Type of Account	Routing Number	Account Number	Financial Institution	I wish to deposit (check one):
Checking Savings				_____% of net pay Specific dollar amt \$ _____ Remainder of net pay
Checking Savings				_____% of net pay Specific dollar amt \$ _____ Remainder of net pay
Checking Savings				_____% of net pay Specific dollar amt \$ _____ Remainder of net pay

I authorize Blount County Government to deposit my wages/salary into the bank accounts specified above and, if necessary, to electronically debit my account to correct erroneous credits. I certify my account(s) allow these transactions. I agree that direct deposit transactions I authorize comply with all applicable laws. My signature below indicates that I am agreeing that I am either the accountholder or have the authority of the accountholder to authorize my employer to make direct deposits into the named account.

EMPLOYEE SIGNATURE

DATE

One of the following is required to process this enrollment (check one):

- Voided check with name imprinted (no starter checks)
- Deposit slip (only accepted if the verbiage "ACH R/T" appears before the routing number)
- Bank letter or specification sheet (the signature of your local bank representative **MUST** be included)
- Other Bank Documentation from your Financial Institution