



Direct Deposit Authorization Form

HUMAN RESOURCES DEPARTMENT

Employee Benefits • 505 West Olive Avenue, Suite 200 • Sunnyvale, CA 94088

EMPLOYEE INFORMATION

Employee Name:	Employee Number
Address:	Telephone Number:

BANK INFORMATION (Staple Voided Personal Check for each account.)

Type of Enrollment: <input type="checkbox"/> New <input type="checkbox"/> Add/New <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <small>If you are canceling an account and wish to discontinue deposit immediately, please check here <input type="checkbox"/></small>	Amount to Deposit: \$ _____ % _____	Routing Number: _____ Account Number: _____
To be completed by HR: Pre-note Req. Deposit Starts: _____			

Financial Institution:

Type of Enrollment: <input type="checkbox"/> New <input type="checkbox"/> Add/New <input type="checkbox"/> Change <input type="checkbox"/> Cancel	Account Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings <small>If you are canceling an account and wish to discontinue deposit immediately, please check here <input type="checkbox"/></small>	Amount to Deposit: \$ _____ % _____	Routing Number: _____ Account Number: _____
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To be completed by HR: Pre-note Req. Deposit Starts: _____			

Financial Institution:

EMPLOYEE AUTHORIZATION:

I hereby authorize the City of Sunnyvale to provide for direct deposit any salary or wages due to me, less my mandatory or authorized withholding or deduction therefrom, in the above designated account.

If at any time the amount of salary or wages deposited exceeds the amount of salary or wages actually due and payable to me, I hereby authorize the City of Sunnyvale to either:

(a) Withhold a sum equal to the overpayment from future salary or wage; or

(b) Recover such overpayment from the above-designated account.

If the City is legally obligated to withhold any part of my wage or salary payment for any reason, or if I no longer meet eligibility requirements for the Direct Deposit program, I understand the City of Sunnyvale may terminate my enrollment in the program.

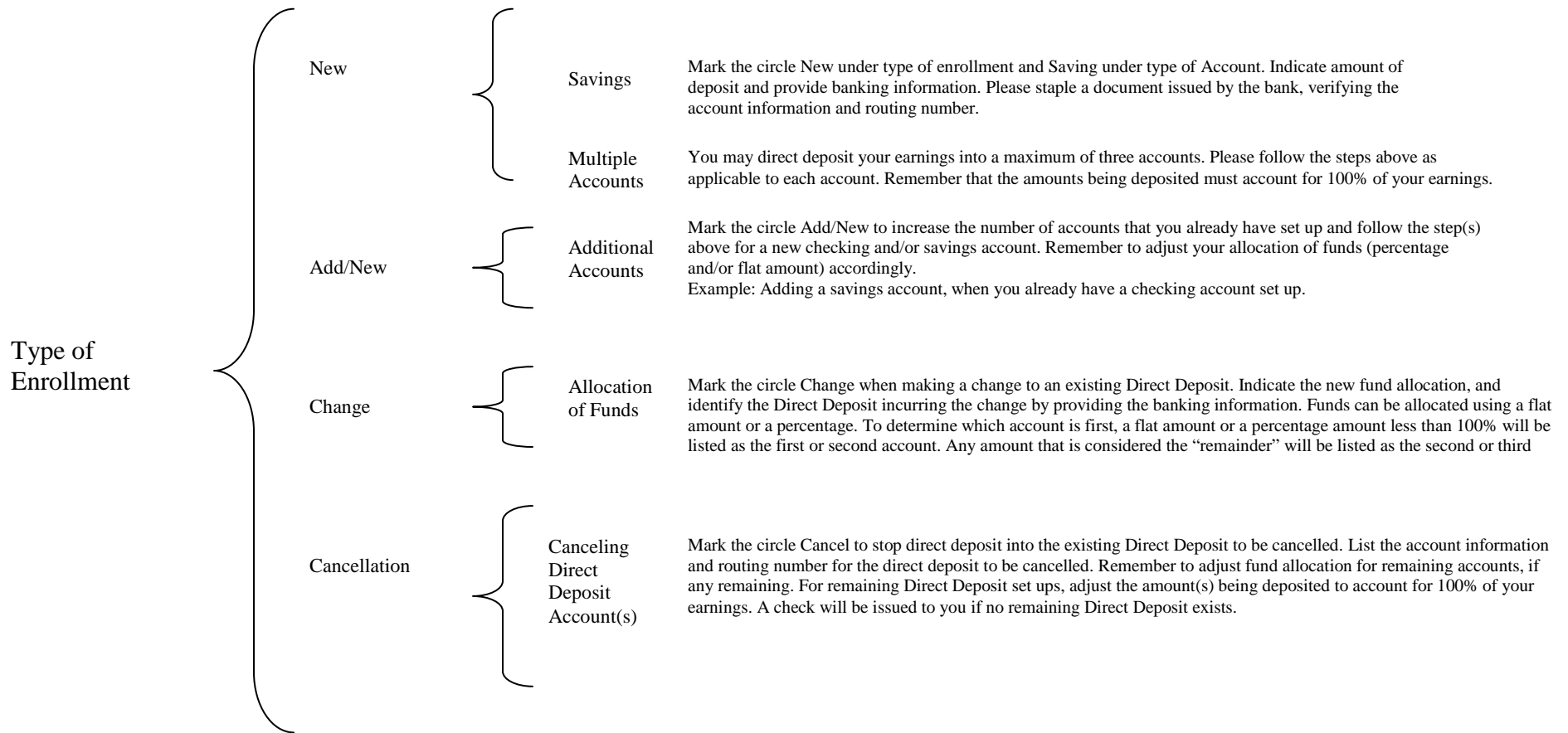
If any action taken by me results in nonacceptance of a direct deposit by the designated financial institution, I understand that the City assumes no responsibility for processing a supplemental salary or wage payment until the amount of the nonacceptance deposit is returned to the City by the financial institution.

Employee Signature:	Date:
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General Instructions on Filling out the Direct Deposit Authorization Form

Step 1 For all transactions, please fill out the form with your Name and Employee Information.

Step 2 Select the type of transaction you wish to do, and follow the instructions as they apply.



Step 3 Once the form has been filled out, sign; date the bottom and submit to the Human Resources Department.

Please Note: All new Direct Deposit accounts take a minimum of 3 pay periods to start. The first 2 pay periods serve as a Pre-Notification stage, which is the process for verifying the bank information provided on the Direct Deposit form. If the pre-notification stage is successful, the Direct Deposit will be effective on the 3rd pay day from initiation. If the pre-notification is unsuccessful, the bank information will be rechecked and tested again the following pay period.