



Direct Deposit Agreement

Authorization Agreement for Automatic Deposit of Net Pay

I hereby authorize WEBER COUNTY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error, to my account(s) listed below, and to credit and/or debit the same to such account.

I further understand that the amount designated under Account 1 will be the balance account, and, that specific dollar amounts are designated under Account 2.

ACCOUNT 1 - MAIN ACCOUNT

Bank Name: _____ Bank Phone () _____ - _____

City: _____ State: _____ Zip Code: _____

Transit Routing Number: _____ Account Number: _____

Please check one: Checking _____ Savings _____

ACCOUNT 2 - ADDITIONAL ACCOUNT

Bank Name: _____ Bank Phone () _____ - _____

City: _____ State: _____ Zip Code: _____

Transit Routing Number: _____ Account Number: _____

Amount to be deposited each pay period: _____ Checking _____ Savings _____

Note: It is your responsibility to make sure that your check is deposited into the proper account(s). Please make sure to check with your financial institution following the first pay period. This will ensure that no mistakes are made.

To ensure accuracy, please write legibly OR you may attach a voided check for each account.

NAME: _____ DATE: _____

(please print)

SIGNATURE: _____