

**DIRECT DEPOSIT AUTHORIZATION AGREEMENT (ACH CREDITS)**

Attach a VOIDED CHECK or DIRECT DEPOSIT FORM from your bank detailing the routing and account information for each account listed.

**Primary Direct Deposit Account Information (DD Net Pay)**

<b>Bank Name</b>	<b>Bank Location (City &amp; State)</b>	
<b>Bank Routing Number</b>	<b>Bank Account Number</b>	
<b>Type of Account:</b>	<b>CHECKING</b>	<b>SAVINGS</b>

**Additional Accounts**

**Direct Deposit 1 (DD1)**

**Bank Name:** \_\_\_\_\_

**Routing #:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Deposit Amount:** \_\_\_\_\_

**Type of Account:**      **CHECKING**      **SAVINGS**

**Direct Deposit 2 (DD2)**

**Bank Name:** \_\_\_\_\_

**Routing #:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Deposit Amount:** \_\_\_\_\_

**Type of Account:**      **CHECKING**      **SAVINGS**

**Direct Deposit 3 (DD3)**

**Bank Name:** \_\_\_\_\_

**Routing #:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Deposit Amount:** \_\_\_\_\_

**Type of Account:**      **CHECKING**      **SAVINGS**

**Direct Deposit 4 (DD4)**

**Bank Name:** \_\_\_\_\_

**Routing #:** \_\_\_\_\_

**Account #:** \_\_\_\_\_

**Deposit Amount:** \_\_\_\_\_

**Type of Account:**      **CHECKING**      **SAVINGS**

**Authorization**

I hereby authorize the Town of Milford to initiate credit entries and to initiate if necessary, debit entries and adjustments for any credit entries in error to my account.

This authorization is to remain in full force and effect until the Town of Milford has received written notification from me of its termination in such time and manner as to afford the Town of Milford and participating bank(s) a reasonable opportunity to act on it.

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_