Wayne County Employees' Retirement System

28 West Adams
Suite 1900
Detroit, MI 48226
Toll free: 1-888-600-6033 Fax: 313-224-1917

Direct Deposit Application

Information About You

Name (First, M.I., Last)			
Social Security Number	Employee ID	Email Address (complete if you wish to have your statement emailed to you)	
Street Address		Daytime Phone Number	
City		State	Zip Code

ENROLL ☐ please deposit my monthly retirement benefit directly in the account indicated below.

CHANGE ☐ please change my current direct deposit information to reflect a new financial institution and/or account number and/or change in deposit amount

CANCEL ☐ please stop ALL direct deposit transmissions to my financial institution

Authorization

I authorize the Wayne County Treasurer to deposit my net pay, by direct deposit (electronic funds transfer) into the designated financial institution(s) and Account Number(s). I understand this authorization remains in effect until cancelled by: (a) me, (b) my death or legal incapacity, (c) Wayne County.
I authorize Wayne County to recover money electronically deposited in my account(s) in error, by either adjusting or debiting the account(s), or withholding future payments.
I consent to and agree to comply with the National Automated Clearing House Association Rules and Regulations, and the State of Michigan's rules about electronic funds transfers, as they exist on this date or as subsequently adopted, amended or repealed. Michigan law governs electronic funds transactions authorized by this agreement in all respects except as otherwise superseded by federal law.

Your Signature:_____ Date:_____

Financial Institution Information

Financial Institution Name	Financial Institution Telephone Number	**STAPLE VOIDED CHECK OR DEPOSIT SLIP HERE**
Financial Institution Address (Number and Street)		
City	State / Zip Code	
Type of Account (check one) ☐ Checking ☐ Savings		
Routing Number (one number per box, must be 9 numbers)		
Deposit / Account Number (one number per box)		

For Office Use Only

Processed by:	Processed Date:	Direct Deposit Start Date:
Comments:		