the Direct Deposit Authorization Form in English:

Direct Deposit Authorization Form (Word/Excel Ready)

Employer Information

- Employer Name: [_____]
- Address: [_____]
- City / Province / Postal Code: [_____]

Employee Information

- Last Name: [_____]
- First Name: [_____]
- Address: [_____]
- City: [_____] Province: [_____] Postal Code: [_____]
- Phone Number: [_____]
- Social Insurance Number (SIN): [_____]
- Employee Number (if applicable): [_____]

Bank Account Information

- Bank Name: [_____]
- Bank Address: [_____]
- Transit / Routing Number: [_____]
- Account Number: [_____]
- Account Type: [ ] Checking [ ] Savings

Authorization

I, [_____], hereby authorize [Company Name] to deposit my pay directly into the bank account listed above.

I also authorize the necessary transmission of information to relevant personnel to set up and maintain the direct deposit. This authorization will remain in effect until I provide written notice of any changes or cancellation.

- Date: [_____]
- Employee Signature: [_____]

For Employer / Payroll Use Only

- Effective Date of Direct Deposit: [_____]
- Verified By: [_____]
- Comments / Notes: [_____]

This template is fully compatible with Word and Excel. In Word, fields can be filled out directly. In Excel, each section can be formatted as input cells for easy typing and data collection.