

Direct Deposit Enrollment Form

Complete and submit this form to your employer's payroll department to initiate direct deposit of your paycheck to Dean Bank.

Name:		Social Security #:	
Company:		Phone:	
Address:			
City:		State:	Zip:

Account Information

Dean Bank 21 Main Street Franklin, MA 02038		Routing #: 211372035	
		Phone: 508-528-0088	
Acct Type: <input type="checkbox"/> Checking	Acct # _____	I wish to deposit \$ _____	or <input type="checkbox"/> Net
Acct Type: <input type="checkbox"/> Savings	Acct # _____	I wish to deposit \$ _____	or <input type="checkbox"/> Net
Acct Type: <input type="checkbox"/> Savings	Acct # _____	I wish to deposit \$ _____	or <input type="checkbox"/> Net
Acct Type: <input type="checkbox"/> Other	Acct # _____	I wish to deposit \$ _____	or <input type="checkbox"/> Net

Authorization

IMPORTANT – READ BEFORE SIGNING:

I hereby authorize my direct deposit to be sent to the Dean Bank account referenced above. I have attached a copy of a voided check for reference (optional).

Signature (Account Owner):	Date:
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Questions? Please contact Customer Service at 508-528-0088 or visit www.deanbank.com

