Dental-Search Inc.
7 Spielman Road
Fairfield, NJ 07004
(973) 575-9581
Fax (973) 808-3305

Please complete this form to enroll in direct deposit
Please note it can take up to two pay periods for Direct Deposit to activate

Direct Deposit Sign Up Form

I hereby authorize my employer, Dental-Search Inc., to deposit any amounts owned me by treating credit entries to my account at the financial institution (herinafter "Bank") indicated on the bottom of this form. Further, I authorize my bank to accept and to credit any credit entries indicated by Dental Search Inc. to my account. In the event that Dental-Search Inc. deposits funds erroneously into my account, I authorize Dental-Search Inc. to debit my account for an amount not to exceed the original amount of the erroneous credit.

This authorization is to remain in full force and effect until Dental-Search Inc. and the Bank have received written notice from me to its termination in such time and in such manner as to afford Dental-Search Inc. and the Bank reasonable opportunity to act on it.

_____ _____ _____/_____
Employee Name Social Security # Signature Date

Date of Birth _____
Account Information:

_____
Bank Name/City/State

____Checking _____ Savings Transit Routing # _____

Account # _____
***** You MUST attach a voided check for all checking account deposits, If you are using a savings account, verify account information with your bank.**
Do NOT use the numbers on a deposit slip for either type of account
The entire net amount of the check will be deposited into the above account.
Check Stubs are available on the ADP Portal

Investopedia