

# DIRECT DEPOSIT AUTHORIZATION AGREEMENT

**nationalgrid**  
a power factor

Employee ID \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Paying Company  National Grid  Keyspan  
Contact Telephone \_\_\_\_\_  Weekly  Bi-Weekly  Monthly

Please Complete below and use the "999" account as your balance (excess dollars) in case of unexpected earnings

Priority Order	Bank Name	Routing Number	Account #	Checking or Savings	Enter Either Amount		Action
					Dollars (\$)	Percent (%)	
1	First Choice Credit Union	211384913		<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Terminate
2				<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Terminate
3				<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Terminate
4				<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Terminate
999 Residual				<input type="checkbox"/> Checking <input type="checkbox"/> Savings			<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Terminate

Please follow the below instructions to ensure expediting your direct deposit;

You must provide a **Blank Voided Check** for all Checking Accounts and a **Blank Deposit Slip** for all Savings Accounts

I authorize National Grid to deposit my earnings each pay day directly into the account(s) named above. This authority will remain in effect until I give written notice of change or termination or until National Grid notifies me that this direct deposit service has been terminated. I understand that I must allow reasonable time for my instructions to be executed.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

- Interoffice completed form in "TDC"-Payroll fax 315-477-7623
- Please not completion of this form does not affect your current Expense Reimbursement Direct deposit disbursement choices
- All employee may contact the TDC-Payroll at 1888-483-2123 for questions pertaining to Direct Deposit options self service options, pay advance viewing/ mailing, Expense Reimbursement direct deposit or any other general inquiries. Listen carefully to the prompt when calling.

**Please Note:** This for is used for Payroll Direct Deposits Only. For expense reimbursement contact AP Expense Administrator 315-428-6901 if you have a 9 digit employee number. If you have a 5 digit employee number you can designate a bank account specifically for expense reimbursements in PeopleSafe Employee Self Service.