Direct Deposit Request Form



1 Complete the form.	Print it and sign it.	direct deposit	Give it to your employer's payroll department to request direct deposit of your check to your Fairfield County Bank checking, savings, and/or money market account.		
Name					
Address					
City		S	tate	ZIP code	
Please have my paycheck automatically de	eposited into the following acco	ount(s). Indicate the amount	to be depos	ited if less than your total net paycheck.	
	Rou	nting Transit #:			
☐ Checking account number	I wi	sh to deposit: \$		or 🗖 Entire Net Amount	
AND/OR					
	Rou	iting Transit #:			
☐ Savings or Money Market account nu	mber I wi	sh to deposit: \$		or 🖵 Entire Net Amount	
221172270					
Fairfield County Bank's routing number					
• In the "Account Details	umber(s) when you sign in our click on My Accounts > . " panel on the left of the scr play the entire number	Accounts Summary > the	n click the	Account Nickname(s)	
I authorize		(name c	of employer)	and my bank to automatically deposit	
my paycheck into my account(s) listed ab	ove (this includes my authoriz				
until I give written notice to cancel it.					
Client signature				Date	

If you have questions or need assistance, please contact Customer Care at 203.431.7431 or visit your local branch.

Member FDIC (01.2024)