

DIRECT DEPOSIT AUTHORIZATION



Use this form to switch your direct deposit to your **Saugusbank** checking or savings account.

COMPANY NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

I hereby authorize my employer to redirect my deposit into the account listed below:

BANK SAUGUSBANK ROUTING NUMBER 211370697

CHECKING ACCOUNT # _____

SAVINGS ACCOUNT # _____

Complete the information below and if applicable, attach a voided check and then submit this signed form to your employer.

NAME ON ACCOUNT _____

ADDRESS _____

CITY, STATE, ZIP _____

TELEPHONE _____ EMAIL _____

SIGNATURE _____

DATE _____



412 Lynn Fells Parkway • 489 Lincoln Ave • One Hamilton Street
Loan Center, 481 Lincoln Ave., Saugus, MA 01906

781.231.3800 | saugusbank.com |   

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