

# Direct Debit (ACH) Form For Monthly Premium Billing Payments



Please complete the form below to have your monthly premium payments deducted from your checking or savings account and return it with supporting documentation to:

Toll-Free Fax: 877-220-3249

or

Mail to:

WageWorks, Inc.

P.O. Box 14055

Lexington, KY 40512

## Authorization

I hereby authorize WageWorks, Inc. to direct debit my account on the dates due for all monthly premium billing payments, including premiums due for myself and eligible dependents. This authorization remains in effect until WageWorks, Inc. receives my written notification to rescind this authorization in time to allow reasonable opportunity to act on my instructions. I also understand that until such time that the bank has finalized the direct debit process, I must continue to send my monthly premiums via check or money order directly to WageWorks, Inc. to avoid any interruption or cancellation of coverage.

<b>Participant Information</b>			
<input type="checkbox"/> New ACH Request		<input type="checkbox"/> Change ACH Request	
<input type="checkbox"/> Cancel ACH Request			
Sponsoring Employer Name			
Participant Name (please print)			SSN:
Dependent Name (please print)			SSN:
Street Address			
City, State, Zip Code			Telephone
Participant Signature:			Date:
Dependent Signature:			Date:

<b>Financial Institution Information</b>			
Name of Financial Institution			
Account Type	<input type="checkbox"/> Checking Account	<input type="checkbox"/> Savings Account	<input type="checkbox"/> Other _____
Account Number			
Routing Number			
<i>Routing # is the first 9 digits reflected in the bottom left hand corner of your check. Please attach a voided check providing both the routing # and the account number that the direct debit will be drawn against. If you have elected Savings Account or Other, please attach a bank verification letter for either Savings Account or the designed other account.</i>			

WageWorks, Inc. will process your scheduled monthly premium payments for direct debit from your designated account within 5 business days from the 7<sup>th</sup> day of each month. Should the payment date fall on a week-end or holiday, the debit will be deducted on the next business day. If the funds in your designated account are insufficient to cover the premium payment required, WageWorks, Inc. will require you to remit a check for the full premium amount in order to prevent termination of coverage. **Note: The direct debit may consist of multiple transaction items based upon the number of individuals and coverage being billed. The direct debit will pull any outstanding premiums owed on the account up to the current month for which premiums are due and will reflect on your bank statement with the entity name of "DataPath".**

**Attach voided check here**