



AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT
NO INTERNATIONAL BANKS

Please ✓ One Box: STEAMFITTER SERVICE FITTER
 (Construction Trades Branch) (Metal Trades Branch)

Bank Name

Bank Address (Number/Street)

City

State

Zip Code

Bank Routing Number (Normally first 9 digits on lower left hand corner of check)

Please Check One:

Checking Account
(Include a voided check)

Savings Account

Money Market Account
(Include a voided check)

Account Number

Name (Participant)

Phone Number

Address

Apt. #

City

State

Zip Code

Please Provide One:

Book Number

(OR)

Social Security Number - First 5 Digits only

Check this box if you want this form to replace a direct deposit form already on file at the Fund Office.

I hereby authorize The Steamfitters' Industry Local 638 Fund Office to remit my payments to the financial institution indicated above, and that financial institution to debit my account and to refund any overpayments. This authorization will remain in effect until I notify the Fund Office in writing that I wish to terminate it.

Date



Signature

