



NEW ACCOUNT SET-UP INFORMATION

Date: _____

Company Name _____

Company Contact Person _____

Trade Name (DBA) _____ Phone Number _____

Address: _____ Fax Number _____

_____ E-Mail: _____

Type of Entity:

_____ Sole Proprietorship _____ Partnership _____ Limited Liability Company _____ Municipality

_____ S-Corporation _____ Corporation _____ Non Profit Corp

If Sole Proprietorship or Partnership, list name(s) of owners:

If Sole Proprietorship, list all family members employed, relationship to proprietor, and dates of birth for all children: _____

Checkbook set up: Bank name and address _____

Account Number _____ Routing Number _____

Starting check number _____ (attach copy of check)



Payroll frequency _____ Weekly _____ Bi-Weekly _____ Semi-Monthly _____ Monthly
_____ Other (Please specify) _____

Pay Day (Mon – Fri) _____ Pay Period Covered _____

First payroll date _____

Payroll submitted by: _____ Phone in _____ E-Mail _____ Fax _____

Delivery Options: _____ Regular US mail _____ Client pick up _____ Courier service (same day / next day)

Federal ID# _____ Filing Frequency _____

State Withholding # _____ Filing Frequency _____

State Unemployment # _____ Unemployment Rate _____

City Withholding # (if applicable) _____ Filing Frequency _____

Will this account have any medical pre-tax plan or retirement plan deductions? _____ yes _____ no

_____ 401 (k) Plan _____ 403 (b) Plan _____ SIMPLE _____ Other _____

_____ Section 125 Pre-tax plan _____ Other _____

Employee Information:

Please provide:

Copies of completed Federal W-4s for all employees

Copies of completed State required W-4s for all employees (if required)

Pay rates and/or salaries

Copies of all year-to-date Forms 941 and state wage and contribution returns

Year to date employee wage summary reports

Year to date records of federal, state and city (if applicable) deposits