

**The University of Texas at Austin  
Automatic Payment Request Authorization Form  
For Retiree Insurance Payments**

**Mark One:**

**New Automatic Payment Request**

**Update previous request**

**Cancel Automatic Payment Request effective \_\_\_\_\_ (mm/yyyy)**

<b>Last Name</b>	<b>First Name</b>	<b>M.I</b>
<b>UT EID:</b>		<b>E-Mail (Optional for payment notification)</b>
<b>Name of Financial Institution</b>	<b>Type of account (Check one)</b> <div style="display: flex; justify-content: space-around;"> <span>Checking</span> <span>Savings</span> </div>	
<b>Bank Routing Number</b>	<b>Bank Account Number</b>	
<b>Account Holder's Name(s) if different from above:</b>	<b>Account Holder's Signature</b>	
<b>Payment Amount (please choose one)</b>  <div style="text-align: center;"> <p><b>Current Amount Due (monthly installment)</b></p> <p><b>Total Amount Due</b></p> </div>	<b>Payment Begin Date: (mm/dd/yyyy)</b>  <i>(Your payment will occur on this day of the month or next available business day. Payments must be made between the 1<sup>st</sup> and the 28<sup>th</sup> of the month)</i>	
<b>ATTACH VOIDED CHECK</b>		
<b><u>AUTHORIZATION AGREEMENT FOR AUTOMATIC PAYMENTS (Debits) AND DEPOSITS (Credits)</u></b>		
I hereby authorize The University of Texas at Austin, hereinafter called UNIVERSITY, to initiate debit and credit entries from/to the account indicated above of which I am an authorized user/ signer. I also authorize the depository named above, hereinafter call BANK, to debit and/or credit the same to such account. This authorization will remain in effect until revoked by me, my Bank or the University.		
In the event my designated account is closed or has insufficient funds, I will receive written notification from the University. The amount due plus a \$25 service fee will be due to the University within 10 days of notification that the funds were not available. I understand that failure to make the payment could result in the cancellation of my insurance coverage.		
_____ <b>Signature</b>		_____ <b>Date</b>

<i>To be completed by Payroll Services</i>	
Entered by: _____	Reviewed by: _____
Date: _____	Date: _____

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For Retiree Insurance Payments**

Automatic payments via Electronic Funds Transfer (EFT) to The University of Texas at Austin can be made directly from your bank account upon your request. You will continue to receive a quarterly retiree billing statement.

**Instructions for completing the form:**

- **Complete all fields.**
- **Attach a VOIDED CHECK.** In lieu of a voided check, you may attach a form from your financial institution with the account number and Automated Clearing House (ACH) routing number.
  - Please note that the ROUTING NUMBER is printed on the lower left hand corner of your checks (the first nine digits). *However, anyone wishing to make payments from a credit union or an investment account should contact their financial institution for proper ACH routing instructions.*

**SAMPLE CHECK**

2222  
11-111  
1111(1)

DATE \_\_\_\_\_

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_

DOLLARS

MEMO \_\_\_\_\_

⑆ 23567890 ⑆ 0000 000000 ⑆ 2222

Bank Routing Number      Bank Account Number      Check Number

- **Sign and date the Authorization Agreement.**
- **Please allow 2 weeks for processing time. You can also set up or change your automatic payment profile online at <https://utdirect.utexas.edu/acct/rec/autopay/> up to 2 p.m. on your scheduled payment date.**
- **Complete a new form to update your payment information or to cancel this authorization.**
- **Notification of payments via electronic funds transfer (EFT) will be sent via E-mail.**
- **For questions, please contact Payroll Services at 512-471-5271**
- **Please return the form and voided check to the MAIN BUILDING, Room 134 or mail in to:**

**THE UNIVERSITY OF TEXAS AT AUSTIN  
ATTN: PAYROLL SERVICES  
P.O. BOX 7849  
AUSTIN, TX 78713-7849**