



**PAYROLL PARTNERS**  
**PLUS**

**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 \_\_\_\_\_ LLC, If yes to LLC, how is it taxed? \_\_\_\_\_

\_\_\_\_\_ S-Corporation \_\_\_\_\_ C-Corporation \_\_\_\_\_ Non Profit Corp \_\_\_\_\_ Church \_\_\_\_\_ Municipality

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 \_\_\_\_\_



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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 \_\_\_\_\_ Online

Delivery Options: \_\_\_\_\_ Regular US mail \_\_\_\_\_ Client pick up \_\_\_\_\_ Courier service (same day / next day)  
\_\_\_\_\_ Secure Email \_\_\_\_\_ Online

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 deductions or retirement plan deductions? \_\_\_\_\_ yes \_\_\_\_\_ no

\_\_\_\_\_ 401 (k) Plan \_\_\_\_\_ 403 (b) Plan \_\_\_\_\_ SIMPLE \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Section 125 Pre-tax plan \_\_\_\_\_ Other \_\_\_\_\_



Employee Information and Year to Date Company 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 by quarter for completed quarters

If moving during a quarter – wage summary reports by pay period

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