

## Agreement for Professional Payroll Services

Company Name \_\_\_\_\_ Start Date \_\_\_\_\_

Address \_\_\_\_\_

Contact \_\_\_\_\_ Phone \_\_\_\_\_

Number of Employees \_\_\_\_\_ Regular Paydate(s) \_\_\_\_\_

### BASIC PAYROLL CHARGES

- Weekly - \$19.95 Basic Payroll + \$ 00.75/check up to 50 checks + \$ 00.60/check over 50 checks
- Bi-Weekly - \$35.90 Basic Payroll + \$ 00.75/check up to 50 checks + \$ 00.60/check over 50 checks
- Year End W2s , W3S ( One time fee of \$50.00 )

### ADDITIONAL SERVICES

- Tax Pay/Full Tax Impounding - \$7.50
- Direct Deposit - \$8.00, plus .75 per employee deposit
- Courier Delivery Services - \$6.50
- Signature-Ready Checks - \$5.00, plus \$15 set-up fee
- Other..... \_\_\_\_\_
- Other..... \_\_\_\_\_
- Other..... \_\_\_\_\_
- Other..... \_\_\_\_\_

### INITIAL CHARGES

* Payroll Checks fees	\$	
* Back work Fees.....		
* _____		
* _____		
* _____		
Total Fees Received.....\$		

### WHAT'S NEEDED TO GET STARTED

- Document to confirm your Tax ID Numbers and tax rates for all Federal and State agencies
- Proof of all Federal & State tax deposits (including UI) for the current quarter
- Fed 941 and State Tax Returns for closed quarters
- Payroll information for all active and terminated employees.
- Detailed YTD & QTD totals for all active and terminated employees
- Employer policies
- Copy of a voided check from your bank

PayTime LLC agrees to provide the above named company with professional payroll services beginning on the date stated above. Client agrees to abide by the standard policies, rules, and procedures as established by PayTime LLC for the term of this agreement.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name and Title

\_\_\_\_\_  
PayTime LLC Representative

## PayTime LLC

*Affordable Payroll Services*

21 Woodtick Road

Waterbury, CT 06705

Phone (203) 757-0808 <> Fax (203) 575-0475

*Because you have better things to do...*

PAYROLL SERVICE SET UP

**DEDUCTION SET UP**

	NAME	(I)ncome (D)eduction (M)emo	NO FED	NO FICA	NO SUI	NO FUTA	NO STATE	NO LOCAL	NO SDI
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									

**OTHER 'PAY-RATES' SET UP**

		NO FED	NO FICA	NO SUI	NO FUTA	NO STATE	NO LOCAL	NO SDI
RATE-2								
RATE-3								
RATE-4								
RATE-5								
RATE-6								
RATE-7								

**DEPARTMENTAL SET UP**

DEPT#	DEPT NAME	W/C#	W/C DESCRIPTIO	W/C RATE
-------	-----------	------	----------------	----------

EXAMPLE

**PayTime LLC**

Affordable Payroll Services

21 Woodtick Road

Waterbury, CT 06705

Phone (203) 757-0808 <> Fax (203) 575-0475

*Because you have better things to do...*

CLIENT ACCOUNT AGREEMENT  
AND  
AUTHORIZATION TO DEBIT

Client Name \_\_\_\_\_

Client authorizes **PayTime LLC** as the "Payroll Service Provider," or its Agent(s) to initiate debit entries for collection of the following:

- a) Payroll Tax Obligations
- b) Employee Direct Deposits
- c) Applicable Payroll Service Fees

Such entries will be debited out of the Client's current payroll account or the account indicated by the sample "VOID CHECK" provided by the Client. This account may change from time to time. When such change occurs, the Client agrees to provide the new account information to the Payroll Service Provider.

\*\*\*\*\*ATTACH VOID CHECK HERE\*\*\*\*\*  
(Must be a VOID CHECK; Deposit receipts do not provide sufficient information.)

This authorization will remain in full effect until the above named Payroll Service Provider has received written notification from Client of its termination in such time and in such manner as to afford the Payroll Service Provider and Financial Institution a reasonable opportunity to act on it. Client also agrees to hold harmless any third parties involved in this process such as the bank and/or any other third parties, for any damages resulting from transactions initiated by the Client or the above named Payroll Service Provider.

I hereby certify that I am a signatory to this account and I have the authority to execute this agreement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

**PayTime LLC**  
*Affordable Payroll Services*  
21 Woodtick Road  
Waterbury, CT 06705  
Phone (203) 757-0808 <> Fax (203) 575-0475  
*Because you have better things to do...*

## CLIENT REQUIREMENTS AND CHECKLIST

Client \_\_\_\_\_

Sales Rep \_\_\_\_\_

Need	Rec'd	N/A	Notes
			EIN & State #s - A document confirming your Federal & State ID Number and State Tax Rate (i.e. Deposit Coupon-8109, a previous quarter's tax return, any printed letter from the IRS & State). If a new business, please provide a copy of your completed SS-4 and State Registration Form.
			A voided check from the bank account that you want to use for your payroll and tax account.
			IRS letter stating a "Monthly" or "Semi-Weekly" depositor. (If none available, PayTime LLC will automatically use "Semi-Weekly" for tax deposits.)
			A copy of your Worker's Compensation Report showing current rates, codes, and classifications.
			A copy of all Federal & State Tax Deposits made this quarter, including date and amount deposited.
			Any garnishments or court orders.
			Quarterly Tax Returns (Federal 941 & State CT941) for all closed quarters - 1st, 2nd, and 3rd...etc.... QTR-TO-DATE

### PayTime LLC

*Affordable Payroll Services*

21 Woodtick Road

Waterbury, CT 06705

Phone (203) 757-0808 <> Fax (203) 575-0475

*Because you have better things to do...*