



AllTrust
Payee Corp., Inc.

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Account Access Code Agreement

I, _____ grant permission to AllTrust Payee Corporation to retain the access code to my PNC Debit Card. My account access code is not my pin number. Should I choose to change my account access code, I will contact AllTrust Payee Corporation and notify them of changes. If I do not provide AllTrust with any changes, AllTrust Payee Corporation will have the right to cancel my debit card.

I have read, understand and agree to the statement above. I understand that it is my responsibility to make sure AllTrust has complete and accurate information at all times.

Client Signature:

Date:

YES, I want to receive the PNC PayCard!

Please provide all the following information required for issuance of your PNC PayCard

Cardholder Information:

Last Name: _____

First Name: _____ Middle Initial: _____

Social Security Number: _____-_____-_____

Home Phone Number: (_____) _____-_____

Birthdate (MM/DD/YYYY): _____

Mother's Maiden Name: _____

Home Address:

Street: _____ Apt. #: _____

City: _____

State: _____ Zip Code: _____

Mailing Address: (If different from Home Address)

Street: _____ Apt. #: _____

City: _____

State: _____ Zip Code: _____

I acknowledge that the following fees will apply to my PNC PayCard:

Purchases (signature and PIN / cash back)	FREE
PNC ATM Withdrawal*	\$1.50
Non-PNC ATM Withdrawal*	\$1.50
ATM Balance Inquiry	FREE
Teller Cash Advance*	\$5.00
Foreign (outside of US) Transaction	3% of transaction amount
Monthly Card Maintenance Fee	\$2.00
Card Replacement (per card)	\$10.00
Rush Card Delivery (added to card replacement fee)	\$15.00
Paper Statement via US Mail (per statement)	\$5.00
<i>Note: Monthly statements available online for free</i>	
Operator-Assisted Phone Inquiry (waived if calling re: lost/stolen card or error/dispute)	\$2.50
Balance Refund Fee (refund card balance via check)	\$10.00
Inactivity Fee (after 6 months of no activity)	\$3.00
*1 st ATM Withdrawal or Teller Cash Advance after each payroll load is free	
A surcharge may be assessed by the ATM owner if not using a PNC or Allpoint® ATM	



I hereby authorize ALLTRUST PAYEE CORP., INC to deposit my pay to the PNC PayCard. If funds or monies to which I am not entitled are deposited to the PNC PayCard, I hereby authorize employer to initiate a correcting debit to my PNC PayCard to withdraw funds to correct the error or overpayment. I hereby authorize employer to act as my agent to submit my application for the PNC PayCard to PNC Bank, the issuer of the PNC PayCard, and to send and receive communications on my behalf to and from PNC Bank regarding my PNC PayCard. I authorize you to notify employer if you do not issue me a PayCard or if you cancel my PayCard. By using the PNC PayCard, I hereby agree to the Payroll Card Terms and Conditions governing my use of the PNC PayCard that I will receive at the time I receive the PNC PayCard. I agree to provide PNC Bank with such information and documentation as PNC Bank may request, and to cooperate with PNC Bank in verifying such information, to enable PNC Bank to comply with applicable federal and state laws and regulations.

I acknowledge and agree that this authorization may be rejected or discontinued by employer or PNC Bank at any time. I understand that this authorization replaces any previous authorization relating to employer payment to me, and unless terminated by employer or PNC Bank, this authorization will remain in full force and effect until employer has received written notification from me of its termination in such time as to afford it a reasonable opportunity to act, or I have terminated the PNC PayCard as provided in the terms and conditions I receive with the PNC PayCard.

Important Information about Procedures for Opening a New Account

To help the government fight the funding of terrorism and money laundering activities, federal law requires all financial institutions to obtain, verify and record information that identifies each cardholder that opens an account. Because you are enrolling for the PayCard service, you are being asked to provide your name, address, date of birth and other information that enables PNC Bank to identify you.

Employee Signature: _____
Employee Name (please print): _____
Employee ID Number: _____
Date: _____

****Please submit this form to your PayCard Program Administrator****

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VISA® and Plus are registered trademarks of Visa in the United States and other countries.
STAR® is a registered trademark of First Data Corporation in the United States and other countries.
Allpoint® is a registered trademark of ATM National, USA Inc.
Bank deposit products and Treasury Management Services are provided by PNC Bank, National Association,
Member FDIC.

