



**Public Employees' Retirement System of Nevada**

693 W. Nye Lane, Carson City, NV 89703 (775) 687-4200 Fax (775) 687-5131  
5740 S. Eastern Ave. Suite 120, Las Vegas, NV 89119 (702) 486-3900 Fax (702) 678-6934  
Toll Free 1-866-473-7768 Website: [www.nvpers.org](http://www.nvpers.org) Email: [nvpers@nvpers.org](mailto:nvpers@nvpers.org)

**Electronic Funds Transfer (EFT) Authorization**

Please print or type in black ink.

Your Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Please select ALL ACCOUNTS to which these EFT instructions are to be applied:

- Your Retirement Benefit
- Beneficiary/Survivor Benefit
- Alternate Payee Benefit

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**EFT Process** - In the first month you start direct deposit or change your bank information, **a paper check must be issued and mailed to your home address.** During this time, verification of your direct deposit instructions will be made with the bank. If no corrections are reported, direct deposit will start the following month.

All properly completed EFT forms submitted to our office by the **14<sup>th</sup> of the month** will be processed for that month or a future month as indicated by you. Contact your bank if you need assistance with the completion of this form.

Start Date \_\_\_\_\_ / \_\_\_\_\_ (A paper check will be mailed to you for this month)  
Month Year

Name of My Bank \_\_\_\_\_

Bank Mailing Address \_\_\_\_\_  
Street City Zip Code

Bank Phone Number (\_\_\_\_) \_\_\_\_\_

Bank Routing Number \_\_\_\_\_ (9 Digit Number)

Bank Account Number \_\_\_\_\_ Checking  Savings   
**(Choose only one)**

I have read and understand the EFT process listed above. I authorize the Public Employees' Retirement System of Nevada (PERS) to send an EFT of my monthly retirement benefit to the account number I have provided. I also authorize my bank to credit the deposit amount to the designated account. If any deposits are made in error, I authorize and direct my bank on my behalf and, on behalf of my executors or administrators, to return such deposits to PERS. **I understand that PERS cannot send a direct deposit to a trust account or any account which does not have my name on it.**

\_\_\_\_\_  
Your Signature Date

\_\_\_\_\_  
Signature of Joint Account Holder (Required for all joint accounts) Date

**Return completed form to the Public Employees' Retirement System, 693 W. Nye Lane, Carson City, Nevada 89703**