

301 Sullivan Way, West Trenton, NJ 08628 800-435-7656 /www.NJM.com

DIRECT DEPOSIT ENROLLMENT INSTRUCTIONS

NJM is pleased to offer you the option of receiving your workers' compensation benefit checks and/or proceeds from a settlement agreement pursuant to WCL § 32 in the form of a direct deposit to your bank account(s), instead of sending you a paper check in the mail. NJM utilizes *Zelle* to securely process its direct deposit payments.

To enroll in direct deposit, please follow the steps below:

- **Step 1.** Review page 1 of the enclosed Direct Deposit Authorization Form, including the Claimant's Rights to Direct Deposit and Authorizations & Understandings.
- **Step 2.** Complete page 2 of the enclosed Direct Deposit Authorization Form. Be certain to complete ALL requested information, or we may be unable to process your request.
- **Step 3.** Create a *Zelle* account for the bank account(s) listed in Section 2 of the Direct Deposit Authorization Form. You can register your bank account for *Zelle* by visiting www.zellepay.com. (If you already have a *Zelle* account for this bank account(s), skip to step 4.)
- **Step 4.** Complete enclosed *Zelle* Account Certification Form. Ensure a Primary Account is selected for any payments where you may receive a difference in the amount of funds to be deposited as outlined in Section 2 of the Direct Deposit Authorization Form.
- **Step 5.** Return completed Direct Deposit Authorization Form and *Zelle* Account Certification Form to your assigned NJM Claim Representative. **Do not send to the Workers' Compensation Board.**

You will receive a payment notification to your *Zelle*-enrolled e-mail or mobile number when a direct deposit is made.

ZELLE ACCOUNT CERTIFICATION

SECTION 1: ZELLE ACCOUNT INFORMATION

The bank account indicated in Section 2.A of the enclosed Direct Depos	sit Authorization Form
is enrolled with Zelle via:	
□ E-mail:	
☐ Mobile Number:	
☐ Make this my Primary account	
The bank account indicated in Section 2.B of the enclosed Direct Depos	it Authorization Form
is enrolled with Zelle via:	
□ E-mail:	
☐ Mobile Number:	
☐ Make this my Primary account	
SECTION 2: DEPOSITOR/CLAIMANT CERTIFICATION	
In signing this form, I authorize NJM to deposit my benefits or settleme	nt proceeds via Zella
into the bank account(s) specified in Section 2 of the Direct Deposit Au	thorization Form. I
certify that the information provided in the Direct Deposit Authorization	thorization Form. In Form and this <i>Zelle</i>
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on	thorization Form. In Form and this <i>Zelle</i> the designated
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on account(s). I understand that all joint account holders have the ability to	thorization Form. In Form and this Zelle the designated of access funds in a
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on account(s). I understand that all joint account holders have the ability to joint account, and agree that NJM will not be liable for any money used	thorization Form. In Form and this Zelle the designated of access funds in a
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on account(s). I understand that all joint account holders have the ability to	thorization Form. In Form and this Zelle the designated of access funds in a
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on account(s). I understand that all joint account holders have the ability to joint account, and agree that NJM will not be liable for any money used	thorization Form. In Form and this Zelle the designated of access funds in a
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on account(s). I understand that all joint account holders have the ability to joint account, and agree that NJM will not be liable for any money used	thorization Form. In Form and this Zelle the designated of access funds in a
certify that the information provided in the Direct Deposit Authorization Account Certification is true and correct, and that my name appears on account(s). I understand that all joint account holders have the ability to joint account, and agree that NJM will not be liable for any money used	thorization Form. In Form and this Zelle the designated of access funds in a