

CPA Access

Configuration and Authorization



CPA Access

Authorization Form

I hereby request Fastpay Payroll Services to grant my CPA access to my payroll information via the Internet using Fastpay's Secure Document Delivery System. Access will only be granted to those I have listed on this form. In the event that this access should be revoked or modified, I am responsible to notify Fastpay immediately.

Name of CPA

Email Address

Phone Number

Provide a Short Description of the Information (401k file, payroll summary, etc.)

Owner/CFO Signature

Date

Print Name and Title

Company Name & Number(s)
(For multiple companies, list all company numbers for which access is required.)

EIN of primary company (FED ID Number)

Fax or Mail this form to:
Fastpay Payroll Services
4418 74th Street, Suite #54
Lubbock, TX 79424
Fax: (806) 780-4640