



**A Division of Hache Financial Solutions LLC
12515 Orange Drive, Suite 810, Davie, FL 33330
Phone (954) 618-1001 - Fax (954) 252-4572**

Company Payroll Setup Information Form

Company's Name: _____ EIN: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Date Registered: _____ State Registered: _____

Owner Name: _____ SS#: _____

Address: _____ City: _____ State: _____ Zip Code: _____

**Bank information to setup payroll tax payments through EFTPS and
Florida Department of Revenue**

Bank Name: _____

Account Number: _____

Confirm Account Number: _____

Routing Number: _____

I provide permission for Hache Financial Solutions, LLC to register and setup payroll tax reporting and collection with EFTPS and Florida Department of Revenue. I understand it is my complete responsibility to provide correct and accurate information to be used for registration with EFTPS and Florida Department of Revenue relating to payroll tax reporting and collection. I certify the information above is true to the best of my knowledge.

Name: _____

Signature: _____ Date: _____