REDEFINING THE WORLD OF PAYROLL + HR

TAX SERVICE WAIVER FORM

I understand that all tax payments and filings submitted by Paylocity are based on **client provided information.** Paylocity will not submit any federal payment without a pin number from the IRS confirming the company name and FEIN.

I further understand that Paylocity will submit state payments and filings. Any payment or filing submitted to Paylocity without the appropriate identification number will be sent with the FEIN. Paylocity will not assume responsibility for any penalties resulting from the incomplete nature of the tax information provided. Please be advised that some states will not properly post payments without a specific state account number.

I understand that I have 30 days from my first checkdate to return completed tax paperwork with no additional fees incurred. After such time, an additional $10 per payroll fee will be assessed until all outstanding information has been submitted. This fee is to cover additional tax processing expense that Paylocity incurs as a result of incomplete tax information.

Paylocity will not assume responsibility fo**r any tax penalties and interest due to incomplete or incorrect information.**

I agree to the above conditions:

Company Name _____

Signature_____ Date_____