

Enroll Client and/or Grant Accountant Access

This form is used to enroll yourself in any online services in Paychex FlexSM or to give your accountant online access. The standard accountant access includes Online Reports and General Ledger Service.

- Client Enrollment _____ Accountant Access _____
 (Complete Sections 1 and 2 (options 1 or 2), if applicable) (Complete Section 2)

Give this form to a Paychex Sales Representative or mail it to your local Paychex office.

Sales Representative Name _____

Section 1. Client Enrollment Information

Client Account Number _____ Service Location _____

Client Company Name _____ Job Title _____

First Name _____ MI (optional) _____ Last Name _____

Date of Birth (MMDDYYYY) _____ Social Security Number _____
(Date of birth and social security number are required for the self username/password reset option within Paychex Flex)

Address _____ City/State _____ Zip Code _____

Primary Phone (required) (_____) _____ Secondary Phone (optional) (_____) _____

Primary E-Mail _____ Fax Number (_____) _____

User Name: First Choice _____ Second Choice _____
(Between 8 & 18 characters) (Between 8 & 18 characters)

Note: User e-mail address and user name must be unique. Your Paychex representative may contact you if either of your selections are already in use.

Is this a Same FEIN Relationship: Yes Provide the parent Client ID _____ No

Is this a Corporate Administrator in a Same FEIN Relationship: Yes No

A Corporate Administrator in a Same FEIN Relationship will have access to all of the information on all of the Clients in that relationship.

Other Accounts to be Linked to _____

Recommended system requirements for performance of Paychex Flex products can be found at www.paychex.com.

Enroll me in the following product(s):

- Receive reports through the Internet only (Internet Client)
 Receive printed reports with payroll and through the Internet (Printing Client)
 Report Writer
 Reports On-Demand
 Data Exports
 Paychex Flex Payroll®
 Company Service (optional but client must have Online Payroll to subscribe)
 Employee Maintenance Access only (non-online payroll client)
 General Ledger Service
 HR and Benefits Essentials on Web site (only available for the bundle packages)
 Employee Access Online (choose from the options below):
 Employee Online Check Stubs (select release date to make check stubs available): Check Date Run Date
 Employee Online W-2s
 Employee Personal and Payroll Information
 Employee Direct Deposit Edits (only available for ASO, PEO, and HRO clients)

Section 2. Accountant Access and User Information

If an accountant requires access to Paychex Flex, complete this section to create a user account if one does not already exist.

Firm Name _____

First Name _____ MI (optional) _____ Last Name _____

Date of Birth _____

Address _____ City/State _____ Zip Code _____

Primary Phone (_____) _____ Primary E-Mail _____

User Name: First Choice _____ Second Choice _____
(Between 8 & 18 characters) (Between 8 & 18 characters)


**SCAN & RETAIN ELECTRONICALLY
 SHRED PAPER COPY AFTER SCANNING**

The following options are for accountant access to a client's Online Reports and General Ledger services.

Note: If an existing accountant user accesses data via online.paychex.com, Option 2 must be selected. If an existing accountant user accesses data via www.paychexflex.com (our new Single Sign On site), then either Option 1 or 2 may be selected.

Option 1

I, the client, will grant my accountant access to the appropriate online services.

Instructions: You do not need to complete the additional information in this section. Contact your accountant and instruct him/her to log into Paychex Flex, select the Company Linking icon () and enter your client number to request access to your account. Once you approve this request, you can grant your accountant access to the appropriate online services.

Option 2

I, the client, prefer that Paychex grant my accountant access to the appropriate online services.

Instructions: The client **must** complete the following information if Option 2 is selected.

Client Account Number _____ Service Location _____
Client Company Name _____ Accountant Phone _____
Accounting Firm Name _____ Accountant User Name _____
Accountant First Name _____ MI (optional) _____ Last Name _____

If this was identified as a SAME FEIN Relationship in Section 1, will the accountant have access to all of the information on all of the Clients in that relationship? Yes No

If no, specify which entities the accountant is granted access to.

Client Account Number _____

Client Company Name _____

I authorize Paychex to grant my accountant access to the online services checked below and affirm that the accounting firm/accountant listed is authorized to access my payroll data, using the services selected below, until I directly notify Paychex otherwise:

Please select the online services you want your accountant to access:

Reporting (Online Reports) General Ledger Service Report Writer
 Run On-Demand Reports and/or Data Exports People Service - Grant Access

Client's Signature _____ Date _____