



Appointment of Employer as Authorized Agent to Open an HSA

Employee Information

_____	_____	_____	
<i>First Name</i>	<i>Middle Initial</i>	<i>Last Name</i>	
_____	_____	_____	_____
<i>Residential Street Address (Not P.O. Box)</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
_____	_____	_____	
<i>Home Phone Number</i>	<i>Date of Birth (mm/dd/yyyy)</i>	<i>Social Security Number</i>	

*** Return this completed and signed form to your Employer *
Do not send to Optum Bank**

Optum Bank
Access to and Retention of Electronic HSA Records

To view the Bank's hardware and software requirements, instructions for viewing and downloading copies of electronic documents, and instruction for updating an email address, follow the link below.

[https://www.optumbank.com/content/dam/optumbank/resources/ns/238 Hardware and Software Requirements.pdf](https://www.optumbank.com/content/dam/optumbank/resources/ns/238%20Hardware%20and%20Software%20Requirements.pdf)