



# Somersworth Housing Authority Landlord Direct Deposit Authorization

## Landlord/Property Owner Information

Landlord/Property Owner Name:

Address:

City:

State:

Zip:

Social Security or Tax Identification Number:

Address:

Phone #:

## Bank Information

Please Check One:

New Direct Deposit Setup

Change Direct Deposit Setup to The Following

Please Check One:

Checking

Savings

Name of Financial Institution:

Routing Number:

Account Number:

## Authorization

It is your responsibility to submit an updated direct deposit authorization form to the Somersworth Housing Authority before the 20th day of the month if you have a change to your account information. All payments will be sent by direct deposit no later than the first business day of the month, as long as funds have been received by HUD. The Somersworth Housing Authority will not be financially responsible if HAP payments are not received due to landlord/owner failure to provide accurate and/or up-to-date information.

I hereby authorize The Somersworth Housing Authority to initiate credit entries (deposits).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**ATTACH A "VOIDED" CHECK HERE IF CHECKING ACCOUNT IS SELECTED OR A DEPOSIT SLIP IF SAVINGS ACCOUNT IS SELECTED.**