

DIRECT DEPOSIT AUTHORIZATION FORM

Name on Account _____ SSN or TIN _____

In Care of, or Doing Business As (if applicable; **needs to be the name the business uses**):

Financial Institution _____

Routing Number _____ Account Number _____

Account Type: Checking Savings Vendor # _____
Current Landlords Only

If you are a current participating landlord, you can find your vendor number in the detail portion of your check stub. It may take up to two payment cycles for your direct deposit to take effect. You will continue to receive a paper check until the direct deposit is processed.

PLEASE PROVIDE AN ORIGINAL VOIDED CHECK, A COPY OF YOUR VALID/**LEGIBLE** PHOTO ID, AND A COPY OF YOUR SOCIAL SECURITY CARD, **OR** EIN ASSIGNMENT LETTER (if renting property under a business name)

NO OTHER FORM OF DOCUMENTATION WILL BE ACCEPTED

Authorization:

I hereby authorize the Housing Authority of the Birmingham District (HABD) and the financial institution above to make direct deposits to my account. This authorization will remain in effect until I have signed a new authorization or upon termination of my participation in the HABD Section 8 Program. If I change or terminate this account without notifying HABD in writing I understand my payments may be delayed.

Signature _____

Date _____

Printed Name _____

Telephone Number (including area code) _____

Email Address (**MANDATORY**) _____

Submit this completed form and required documents to:

Housing Authority of the Birmingham District
McCoy Building
1301 – 25th Avenue North
Birmingham, AL 35204
Attn: Brenda Kimble or Shundria Keye

Send inquiries to:

Fax: (205) 521-7464 or Email: bkimble@habd.net or
skeye@habd.net

Please DO NOT fax direct deposit documents!
Only mail, hand delivery or email documents will be accepted!

