



COLORADO
SPRINGS
HOUSING
AUTHORITY

831 S. Nevada Ave
P.O. Box 1575, MC 1490
Colorado Springs, CO 80901-1575
(719) 387-6700 Fax- (719) 632-7807
TDD- (800) 659-3656

**Authorization Agreement for Direct Payment
(ACH Debits)**

Sign up by the **27th** of this month to have funds pulled for the following month.

I (We) authorize the Colorado Springs Housing Authority (the "Authority") to initiate variable entries to my (our) account described below:

- Checking Account # _____
- Savings Account # _____

Routing # _____ Financial Institution's Name _____

Must attach a **voided check** from a **checking account** or a **deposit slip** from a **savings account** or provide a statement from the financial institution indicating this information.

(Do not attach a deposit slip from a checking account.)

This authorization is to remain in full force and effect until the Authority has received written notification from me (or either one of us) of its termination at such time and manner as to afford the Authority a reasonable opportunity to act on it.

(Optional-For Joint Account)

*Signature _____
Full Name _____
Address _____

Telephone # _____
Date _____

*Signature _____
Full Name _____
Address _____

Telephone # _____
Date _____

The Authority will process your auto withdrawal for rent the 1st business day of the month. You may not see the funds coming out of your account until several days later depending on your bank. You must cancel or place hold before the 1st business day of the payment month, no later, to stop current month's withdrawal. Call 719-387-6723

Mail completed form to:

Colorado Springs Housing Authority
Attn: Accounting Department
P.O. Box 1575, MC 1490
Colorado Springs CO 80901-1575

New sign-up

Change