

Direct Deposit Authorization Form – Section 8 Housing Choice Voucher Program

Contact Information:

Landlord Name (Company or Individual): Federal Tax ID # (FEIN) (for Company): Social Security # (for Individuals): Leasing/Rental Contact Email: Payment Confirmation Email (if different from al	bove):		
Contact Phone #:			
Direct Deposit Information:			
Name of Financial Institution: Financial Institution Routing Number: Financial Institution Account Number: Name on Account:			
Financial Institution Account Type (circle one):	Checking	or	Savings

HAP is scheduled for deposit between the 1st day through the 5th day of each month. Payments may be delayed further if funds have not been received from HUD.

Effective immediately, I authorize and direct the Fond du Lac County Housing Authority to initiate Direct Deposit to my account indicated above. If an incorrect amount is deposited into my account, I authorize Fond du Lac County Housing Authority to make the appropriate adjustments. This authorization will remain in effect until the Fond du Lac County Housing Authority receives written notice of termination from me in such time and manner as to allow the Fond du Lac County Housing Authority a reasonable opportunity to act on it. I acknowledge that the origination of ACH transactions to my account must comply with the U.S. law.

Owner's Signature

Date

Please attach a voided check if funds are to be deposited into a checking account. If funds are to be deposited into a savings account, please attach a memo from your bank with routing number and account number information. Payment will not be made without attached information

Please return:

Mail:	Fond du Lac Housing Authority
	Attn: Brenda Oestreich, Business Manager
	15 North Marr Street
	Fond du Lac, WI 54935
Fax:	(920) 929-7094
Email:	boestreich@fdlpha.org