**DIRECT DEPOSIT AUTHORIZATION FORM**

Initial Enrollment Change Checking Account Savings Account

I hereby authorize the Regional Housing Authority of Sutter and Nevada Counties (RHASNC) to initiate credit entries and, only if necessary, debit entries and adjustments for any credit entries made in error to my checking or savings account indicated below (Debit entries will ONLY be initiated in the event that a credit was erroneously made into your account by RHASNC AND after it was verified that you received or will receive proper notification that said credit was not due to you).

Persons / Business Bank Account name (Name/s on Bank Account)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Financial Institution (Bank name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9 Digit Routing Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bank Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SSN/TIN of persons/business on Bank Account \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Each owner or authorized person MUST complete the authorization form. Name on account and Tax ID must match RHASNC recorded ownership documents.***

Please note: The persons/business’ name and SSN/TIN to which the direct deposit is made will receive a 1099 from the RHASNC at year end. Therefore, before a direct deposit can be made, RHASNC must have a W-9 on file for the persons/business’ for which the direct deposit will be made

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please select and attach **only one** of the following:

* **Checking:** Attach a voided blank check from the account where the direct deposit will be made. Your name must appear on the account.
* **Savings:** Attach a deposit ticket with your name, address, bank routing number and account number.

**RETURN TO:**

**Regional Housing Authority of Sutter and Nevada Counties**

**1455 Butte House Road**

**Yuba City, CA 95993**

**Phone (530) 671-0220 x111**

**Fax (530) 674-8505**

**Or email m.lundgren@rhasnc.org**

**Please allow ten business days for processing**