

HOUSING AUTHORITY OF SNOHOMISH COUNTY

12711 - 4th Avenue West • Everett, Washington 98204

(425) 290-8499 • FAX (425) 290-5618

DIRECT DEPOSIT/AUTOMATIC WITHDRAWAL AUTHORIZATION FORM

- 1) This form must be filled out *completely* and received by HASCO by the 15th of the month prior to the desired start date.
- 2) The form must be signed by the account owner or authorized agent. If your bank account requires two signatures, both parties must sign this form.
- 3) Attach a voided check. If you are using a savings account, or you do not have checks, contact your bank to verify the correct bank routing number and full account number to be provided on the form below. **No deposit slips and debit cards numbers! That information is not accurate for this purpose.**
- 4) Landlords with multiple tenants: only one form is needed – if you are currently enrolled in direct deposit, do not submit additional forms for each new tenant.

If you have further questions, contact Tamara Self at (425) 290-8499 x524 or tself@hasco.org

COMPLETE THE FOLLOWING

Depository (Bank) Name: _____ Checking Savings (check one)

Bank Routing #: _____ Account #: _____

I/we hereby authorize the Housing Authority of Snohomish County to initiate credit entries (direct deposits) OR debit entries (auto-withdrawals) for the following reason:

I am a landlord or S8 Homeowner and I want my housing assistance payment directly deposited into my account. Provide your tenant's name (only one name required): _____.

OR

I am a HASCO tenant and I want my rent and any additional pre-authorized amounts automatically withdrawn from my account.

This authority is to remain in full force and effect until the Housing Authority receives written notification from me/us of its termination in such time and manner to afford the Housing Authority a reasonable opportunity to act on it.

Print name: _____ Soc Sec # or Tax ID # _____

Print name: _____ Soc Sec # or Tax ID # _____

Contact phone #: _____ Address: _____

Authorized signature: _____ Date: _____

Authorized signature: _____ Date: _____