



Plano Housing Authority

AUTHORIZATION FORM FOR DIRECT DEPOSIT ACH CREDITS

I (we) hereby authorize **PLANO HOUSING AUTHORITY**, hereinafter called **PHA**, to initiate credit entries for (Application) to my (our) account indicated below and the financial institution named below, hereinafter called **FINANCIAL INSTITUTION**, to credit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

* <input type="checkbox"/> Original Set up		<input type="checkbox"/> Bank Account Change		<input type="checkbox"/> Currently On File (Need not complete)	
*Financial Institution Name:			Branch:		
Address:			*Type of Account (check one below):		
City/State:			<input type="checkbox"/> Checking		
Zip:			<input type="checkbox"/> Savings		

*Name on Account:
*Routing Number:
*Account Number:

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

*Print Individual/Company Name:
*Owner Social Security or Federal Employer ID #
*Signature:
*Date:

*****PLEASE ATTACH COPY OF VOIDED CHECK TO THIS FORM!*****

Effective March 1, 2007, PHA requires that all HAP payments be made by direct deposit.

*Owner Name on File (If different from above):
Owner ID number assigned by PHA:
*Owner Telephone:
Owner Email:
Tenant Name:

Please type or print clearly. All items marked with an asterisk (*) are required and must be completed – incomplete and/or illegible forms will not be processed, possibly delaying payments.