



LEASING OPERATIONS DIRECT DEPOSIT

DIRECT DEPOSIT ENROLLMENT INSTRUCTIONS

Print and complete a separate authorization form for each vendor number.

It is very important to provide the correct tax identification (1st 5 digits) and name.

- **Tax identification **FIRST 5 DIGITS ONLY**** – This may be your social security number or the tax id assigned by the IRS for your business name. If you use multiple names and/or tax identifications, each must be submitted separately.
- **Your name** - exactly as it appears on your current Rochester Housing Authority check.

MAILING INSTRUCTIONS

ATTACH EITHER: (*Starter checks and deposit slips are NOT acceptable*)

- For checking account - **ORIGINAL** (not copied or scanned) **VOIDED BLANK CHECK**
- For savings account – **LETTER PROVIDED BY YOUR BANK with account number and routing information** (not a bank statement)

MAIL TO:
ROCHESTER HOUSING AUTHORITY
FINANCE DEPT – JOANNE NEILANS
675 WEST MAIN STREET
ROCHESTER, NY 14611

Please be sure to notify RHA if there is any change in bank accounts. Form is available at www.rochesterhousing.org using the following links.

1. Section 8
2. Landlords/Direct Deposit/Modify Existing Account

Please be sure to keep your address current by sending an email to the following address. For all other questions not related to direct deposit, please email RHA at section8@rochesterhousing.org

If you have any questions or concerns regarding direct deposit, please email RHA at directdeposit@rochesterhousing.org.

Email address is for direct deposit sign-up or changes only.

ROCHESTER HOUSING AUTHORITY
AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS

- Payments will be deposited directly into your checking or savings account no later than the 3rd business day of each month dependent upon the receipt of HUD funding.
- Direct deposit will only be made to **one** bank account
- You will be provided with information to access your check detail on-line.
- Be sure funds have been deposited before making any withdrawals. Rochester Housing Authority (RHA) will not be responsible for any fees incurred.

_____ New to direct deposit program
_____ Change direct deposit account
_____ Stop all direct deposits effective _____ (date)

I hereby authorize Rochester Housing Authority, hereinafter called RHA, to directly deposit my Housing Assistance Payment (HAP) to my:

_____ Checking
_____ Savings account.

This authorization is to remain in force until RHA has received written authorization from me of its termination or account change in such time and in such manner as to afford RHA and Depository a reasonable opportunity to act on it. The only exception will be the rejection of any payment by the Depository. In this event, Direct Deposit will be terminated and a check will be processed on the next scheduled date.

Landlord/Agent Information **(PLEASE USE THE FIRST 5 DIGITS OF YOUR TAX #):**

NAME: _____ SSN/TAX ID
(1st 5 digits) _____

ADDRESS: _____

DAYTIME TELEPHONE NO: _____

LANDLORD/AGENT SIGNATURE: _____

DATE: _____

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Mail this authorization form along with your voided check or savings account information to the address in the instructions. Original signature is necessary.