

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSITS (ACH CREDITS)

Company Name: Harrisonburg Redevelopment and Housing Authority **Tax ID:** 54-0625939

I (we) hereby authorize **Harrisonburg Redevelopment and Housing Authority** to initiate credit entries to my (our) Checking/Savings Account indicated below at the depository financial institution named below and to credit the same to such account. I (we) acknowledge that origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Tenant Name: _____

Depository/Landlord Name: _____

Bank Name/Branch: _____

City: _____ State: _____

Please mark one:

Checking Account: _____ Savings: _____

Routing Number: _____ Account Number: _____

This authorization is to remain in full force and effect until the Harrisonburg Redevelopment and Housing Authority has received written notification from me (or either of us) of its termination in such manner as to afford the Harrisonburg Redevelopment and Housing Authority and/or me (or either of us) a reasonable opportunity to act on it.

Name(s): _____

(Please print)

Tax ID or Social Security Number: _____

Date: _____ Signature: _____

Email Address: _____

Note: This authorizes the Harrisonburg Redevelopment and Housing Authority to deposit money into my account for payment due as agreed upon.