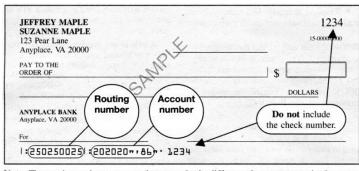
## **ACH Debit Authorization**

## AUTHORIZATION AGREEMENT FOR DIRECT RENT PAYMENTS (ACH DEBITS)

Resident Name:	ID Number:	
I hereby authorize THE HOUSING AUTHORITIES NEGAHA, to initiate debit entries to my Check indicated below at the depository financial institution and to debit the same to such account. I acknowledge account must comply with the provisions of U.S. law.	king Account named below	/ Savings Account (select one) v, hereinafter called DEPOSITORY,
Depository Name:	Branch:	
City:	State:	Zip:
Routing Number (9 Digits):	Account Number:	
This authorization is to remain in full force and effective from me of its termination in such time and in such measonable opportunity to act on it. This authorization continuing to be a resident and final accounts balances	anner as to aff tion will be o	ford NEGAHA and DEPOSITORY a
Name(s):		lumber:e completed by the Housing Authority)
Signature:	·	Date://

A VOIDED CHECK must be attached to this authorization if a checking account will be debited.



Note. The routing and account numbers may be in different places on your check.