

HOUSING AUTHORITY OF CLACKAMAS COUNTY

AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT

The Housing Authority of Clackamas County (HACC) is consistently looking for ways to better serve our owners/landlords. To provide monthly payments in a timely manner, **ALL** Housing Assistance Payments (HAP) are made by direct deposit. It is mandatory for all owners/landlords to have their information back to us IMMEDIATELY. The direct deposits will be automatically deposited into your designated bank account on the first* of every month.

(*If the first of the month is a weekend or holiday, payment will be released on the next business day.)

To sign up for Direct Deposit...

Choose an Account:

- ✓ Checking account, attach a voided check for the account into which you would like HACC to deposit the payment. **NOTE: Deposit slips will not be accepted.**
- ✓ Savings account, please obtain the correct transit routing number and account number from your financial institution.

1. Return this form (with your voided check if applicable) to HACC by:

Mail: ATT: Landlord Services, P.O. Box 1510, Oregon City, OR 97045 or by email to Landlordservices@clackamas.us

Jay Doe 391 Acton Avenue Anytown, USA	Date 16-66/1220	123
Pay to the Order Of _____		\$0.00
Bank of Success 465 Main Street Anytown, USA	VOID	
For _____		
1569- xx0xx0xxx0		

To make a change for Direct Deposit...

1. Written notification of all changes must be submitted to HACC at least 20 days prior to payment date.
2. Follow the instructions above to submit your new information.

Direct Deposit for Vendors

By acceptance of the funds through direct deposit, the owner certifies that to the best of his/her knowledge the dwelling unit is in decent, safe, and sanitary condition; the contracting family is in the unit and is expected to be there the entire month; the deposited amount is in accordance with the provisions of the HAP contract and is payable under the HAP contract; and all other facts and data on which this amount is based are true and correct.

Check One New Direct Deposit Sign-up Change to an Existing Direct Deposit

Tenant/Unit Address _____

Designated Account Savings Checking

Routing Number _____ **Account Number** _____

By signing below, I hereby authorize HACC to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to our account designated below:

Owner/Payee Name _____ **Soc. Sec. No./** _____

Tax ID No. _____

Signature _____

Date _____

Phone Number _____

Soc. Sec. No./ _____

Owner/Payee Name _____

Tax ID No. _____

Signature _____

Date _____

Phone Number _____

OWN-Direct Deposit (08-29-2022)

Office Use Only Tenant ID: _____ Vendor No.: _____ Date Entered: _____