



TACOMA HOUSING AUTHORITY

AP Direct Deposit Change Form

INSTRUCTIONS

1. Fill out this form completely; do not omit any information.
2. Use the routing number from checks only, not from deposit slips.
3. To expedite the initial setup attach a voided check from your account.
4. Return the completed form and attached voided check to the Tacoma Housing Authority to the address/fax/e-mail listed below.

Payee Name (name on W-9): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Phone #: _____

OLD BANK INFORMATION (where payments were deposited)

Bank Name: _____

Routing # (9 Digits): _____

Account #: _____

NEW BANK INFORMATION where you want payments directly deposited

Bank Name: _____

Routing # (9 Digits): _____

Account #: _____

Select One: Checking Savings

I hereby authorize Tacoma Housing Authority (THA) to initiate credit entries to the account designated. This authorization remains in force until THA receives written notification from me of its termination. I agree to contact THA immediately about any overpayments made to this account. I agree to immediately reimburse THA in full for all overpayments received.

Authorized Signature _____ Date _____