



MAIL COMPLETED FORM TO:
 LYCOMING COUNTY HOUSING AUTH.
ATTN: FINANCE DEPT.
 1941 LINCOLN DRIVE
 WILLIAMSPORT, PA 17701

LANDLORD DIRECT DEPOSIT FORM

SELECT ONE ONLY: **NEW ENROLLMENT** **CHANGE**

Contact Information:

Landlord Name (Company or Individual): _____

Tax ID # (FEIN or SS#): _____

Address: _____

Telephone Number: _____

EMAIL: _____

Direct Deposit Information:

Name of Bank: _____

Name on Account: _____

ROUTING NUMBER (9 Digits): |__||__||__||__||__||__||__||__||

BANK ACCOUNT NUMBER (**DO NOT include the check number as part of the account number**)

|__||__||__||__||__||__||__||__||__||__||__||__||__||__||

TYPE OF ACCOUNT (check one) |__| Checking * |__| Savings *

*Please attach a voided check if funds are being deposited into a checking account. For savings account, please attach a letter from your financial institution.

HAP is scheduled for deposit between the 1st day through the 5th day of each month. Payments may be delayed further if funds have not been received from HUD.

Effective immediately, I authorize and direct Lycoming County Housing Authority (LHA) to directly deposit my Housing Assistance Payment to my account indicated above. If an error is made in terms of a deposit (i.e., duplicate entry, incorrect receiver, incorrect dollar amount) I authorize LHA to make the appropriate adjustments/debit entries, in accordance with the reversal rules of the National Automated Clearing House Association. This authorization will remain in effect until LHA receives written notice from me of its termination in such as manner to afford LHA a reasonable opportunity to act on it. I acknowledge that the origination of the ACH transactions to my account must comply with the provisions of U.S. law.

Owner's signature _____

Date _____

OPTIONAL Electronic 1099 Consent:

By signing below, you are authorizing Lycoming Housing Authority to provide your 1099 by electronic means only; a paper copy will not be provided to you. You must provide an email address above to be notified when the 1099's become available. This consent remains in effect indefinitely or until you inform LHA that you wish to revoke the consent. Simply notify LHA in writing that you would prefer a paper copy instead of the electronic version.

Owner's signature _____

Date _____