



## Richmond Redevelopment & Housing Authority Mandatory Authorization of ACH/Direct Deposit

**PLEASE COMPLETE THIS FORM AND EMAIL WITH A VOIDED CHECK TO: [Accounts.Payable@rrha.com](mailto:Accounts.Payable@rrha.com)**

<input type="checkbox"/> New setup <input type="checkbox"/> Cancellation	<input type="checkbox"/> Change financial institution <input type="checkbox"/> Change account number or account type <input type="checkbox"/> <b>Already receiving Direct Deposit Payments under this Tax ID number, do not need to complete</b>
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### PART 2: Payee Identification

1. Owner Tax ID <i>(Social Security Number or Employer Identification Number)</i>	2. Work Phone Number		
3. Name	4. Home Phone Number		
5. Street Address	6. City	7. State	8. ZIP Code

### PART 3: Financial Institution *(Contact your financial institution for this information, if necessary.)*

13. Financial Institution Name	14. City	15. State	16. ZIP Code
17. Routing Transit Number	18. Customer Account Number	19. Type of Account <input type="checkbox"/> Checking <input type="checkbox"/> Savings	

### PART 4: Payee Identification

<p>I (we) hereby request and authorize Richmond Redevelopment &amp; Housing Authority to deposit payments by electronic funds transfer into the account specified below and, if necessary, debit entries and adjustments for any amounts deposited electronically in error. I recognize that, if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or my payments may be erroneously transferred electronically.</p> <p>This authorization will remain in effect until Richmond Redevelopment &amp; Housing Authority has received written notice to terminate the ACH/Direct Deposit transactions. <b>The undersigned must allow four to six weeks for initiating or terminating direct deposit and is responsible for notification of any change in financial institution information.</b></p>		
9. Authorized Signature	10. Print Name	11. Date
12. Payee email address:		