Enrollment is EASY! Columbia County Housing Authority is going direct deposit! Please follow the directions below and return your form as soon as possible for processing.

1. Complete the authorization Agreement for Automatic Deposit Form enclosed. Enter all necessary information on the Authorization form (all Owners or Authorized Signatories must sign). Please do not omit any information.

2. Attach an original voided check for the checking account into which you would like the Housing Authority to deposit the funds; you may write “VOID” across the front of the check and blacken the signature portion of the check. If you are having your funds deposited into a savings account you will need to obtain the correct “Routing Number” from your bank, along with the savings account number and submit it with the enclosed authorization form.

3. Please return completed form together with your voided check to Columbia County Housing Authority. 700 Sawmill Road, Suite 101, Bloomsburg, PA 17815.

4. Please allow 60-90 days to process.
AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSITS

TEANT

I hereby authorize and request the Columbia County Housing Authority, hereinafter called the CCHA, to make payment of any amounts owed to me by initiating credit entries to my account indicated below in the bank named below, hereinafter called the BANK, and I authorize and request the BANK to accept any deposits initiated by the CCHA to such account and to credit the same to such account without responsibility for the correctness thereof. In the event of an overpayment in error, I hereby authorize the CCHA to initiate correcting entries to my account in the amount of such error.

Tenant Name: _______________________________________________________________________

Social Security Number: ________________________

Signature____________________________________________ Date____________________________

Send email notification YES___ NO ___ Email Address: ___________________________________

Direct Deposit Checking____ Savings ____ Credit Union ____ Other ____

Bank
Name____________________________________________________________________________

Transit Number: □□□□□□□□□□□□□□□

Account Number: □□□□□□□□□□□□□□□

PLEASE ATTACH A VOIED CHECK: WE CANNOT PROCESS YOUR DIRECT DEPOSIT WITHOUT A VOIED CHECK ATTACHED.

Mail completed form to:

COLUMBIA COUNTY HOUSING AUTHORITY
700 SAWMILL ROAD, SUITE 101
BLOOMSBURG, PA 17815