



Section 8 Landlord Direct Deposit Authorization Form

I hereby authorize the Loveland Housing Authority to credit to the bank account listed below my monthly Housing Assistance Payment. Please see attached voided check or deposit slip for this account that I am designating for direct deposit.

Landlord Information

Name: _____

Address: _____

Social Security# _____

Federal ID # _____

Financial Institution Information

Name on Account: _____

Account Number: _____

Routing Number: _____

Name of Bank: _____

Account Type: Checking _____ Savings _____

Signature

Date

Phone Number

Attach a Voided Check or a Deposit Slip