The Housing Authority of the City of Aurora

2280 S. Xanadu Way • Aurora, Colorado 80014 • Telephone (720) 251-2100 • Fax (303) 340-1972 • E-mail Section8@AuroraHousing.Org

Direct Deposit Change of Account Information

All changes must be submitted ten (10) working days before the end of the month in order for them to take effect for the following month. I authorize the Aurora Housing Authority (AHA) and the financial institution named below to automatically deposit my rent payment into my account.

This includes my authorization for AHA to reverse any AHA entries made in error and deposit the correct amount. This authorization does not permit AHA to withdraw any funds for refunds, overpayments, or recoup of rental assistance payments.

This authorization will remain in effect until I give written notice to the Aurora Housing Authority Finance Department to discontinue.

OWNER/AGENT NAME:

_____

PHONE NUMBER: _____

NAME ON ACCOUNT (if different from above, Please utilize this space if AHA has submitted payments to you under a name other than the one listed above):

_____

FINANCIAL INSTITUTION (BANK) NAME:

_____

_____

Bank Routing Number: (9 digits usually on bottom left of check):_____

Account Number: (usually on bottom right of check):_____

Account Type: Checking _____ Savings _____

SIGNATURE: _____ DATE: _____

Ownership/Management Change requests will be processed effective the 1st of the month following the date that all the required paperwork are submitted to the AHA, unless a later effective date is requested.

ATTACH VOIDED CHECK HERE

Please mail or fax this completed form and your voided check to:

Aurora Housing Authority -2280 S. Xanadu Way – Aurora, CO 80014

Fax # (303) 340-1972

EQUAL HOUSING OPPORTUNITY