## **Metropolitan Housing Authority**

88 West Third Street . Mansfield, OH 44902 . (419) 524-0029

Dear Landlord,

In an effort to improve customer service to property owners and landlords, the Metropolitan Housing Authority has implemented direct deposit payments for all Housing Assistance Payments. This method of payment delivery offers many advantages:

- In most cases you will receive your payment via direct deposit on or before the third business day
  of the month
- You will be notified electronically that funds will be deposited.

The advantages above outline why MHA is utilizing direct deposit of Housing Assistance Payments. For you to receive assistance it is important that you have the following in place:

- Your financial institution must be a member of an Automated Clearing House to participate in the direct deposit program
- You must complete the authorization form (attached to this correspondence), have a valid
  account, and submit a voided check or a letter from your financial institution that contains the
  routing number and account number so MHA can make the deposit.
- You must have a valid email address to receive email payment confirmations.

Thank you for your participation in direct deposit.

Sincerely,

Metropolitan Housing Authority

## TERMS AND CONDITIONS FOR PARTICIPATING IN THE - MHA DIRECT DEPOSIT PROGRAM

As a participating Landlord in a Mansfield Metropolitan Housing Authority Housing program, direct deposit of Housing Assistance Payments is mandated. This form authorizes MHA to deposit your Housing Assistance Payments (HAP) directly into your account at your financial institution.

The following are the terms and conditions for participating in the direct deposit Program.

- 1) Your financial institution must be a member of an Automated Clearing House in order for you to participate in the Housing Authority direct deposit Program.
- 2) You must complete this authorization form to enroll in the direct deposit program. A signed and dated form is required for processing. If you have a joint account, both parties must sign the form. You must also attach a pre-printed voided check or a letter or statement from your financial institution verifying both the routing and account numbers to the direct deposit form. Once your form is received it may take up to 2 weeks for administrative processing before enrollment becomes effective.
- 3) All funds will be credited no later than the 5<sup>th</sup> day of the month. You will receive an email confirmation of funds deposited to your account.
- 4) If an electronic transfer is returned to MHA or for any reason cannot be made to your account, MHA may place a hold on your check.
- 5) It is your responsibility to notify MHA immediately of any changes in your account, such as account closure or change in account number. Complete this form indicating the action is a change and specify the new account information. All changes must be received by the 15<sup>th</sup> of the month prior to the month the direct deposit is to be processed. Attach a pre-printed voided check to any change requests or other verification as specified above in number 2.
- 6) Your financial institution or MHA may also cancel this agreement. The MHA reserves the right to automatically cancel your participation in the direct deposit program for violations of the HAP Contract or notification from the Internal Revenue Service (IRS) or other authorized governmental agency.

If you have any questions regarding this form, the direct deposit program or any electronic transfers to your account, please call 419.524.0029

## **Notice of Intent to Collect Private Data**

All payment recipients are asked to provide the private data listed on this form to the Department of Finance for the following purposes. Social Security Number (SSN) or Federal Employee Identification Number (FEIN): Needed for identification purposes. This number is used to match recipients with payments. This number is also called a Tax Identification Number or TIN number. You are not legally required to provide this data. However, incomplete or incorrect information may cause a delay in converting to EFT.

## DIRECT DEPOSIT AUTHORIZATION AGREEMENT HOW TO COMPLETE THIS FORM

Read the reverse side of sure you understand the agreement.     Fill in all boxes below. F     Sign and date the form a check (see example below.)  Mailing Address (General)  Name:	this form completely, making terms and conditions of the Please print clearly.	5) Return form to MHA 88 W Third Street,		to 419-524-1487,
Address: City:			Zin Code	
Action: New:Change:_ Contact Information Contact Name:	Cancel:	Effective Dat	e:/	
Email Address:				
Phone Number: ()			ax: ()	
Federal ID_ <b>OR</b> Social Sec	urity Number_			
Federal ID / Social Security				
ABA Routing Number:				
Customer Account Number:				
Financial Institution Name:_				
Street Address:				
City, State, ZIP Code:				
Type of Account: Checkin	g:_Savings:			
Ownership of Account: Self:	Business:			
certify that I have read and understance Metropolitan Housing Authority (Nassistance Payment (HAP) obligation contract(s) for HAP overpayment Signature:  If the account is a joint account or in som Signature:	MHA) to initiate credit entries to s. I also authorize MHA to inits or HAP errors.  Printed Nameone else's name, that individua	to the account indicated a tiate, if necessary, debit e e: I must also agree to the term	bove for the purpose of entries and adjustments Date: ns stated above by signing	payment of Housing to any HAP
/ignature	i illiteu ivalii	·	Date.	
will accept direct d 2) Verify your accoun number with your t	institution to make sure they 123 Mai	Mary Landlord n Street n, OH 12345	Date: \$	
	010000044 2345567	89022 12	NOTE: THE ACCOUNT AND DIFFERENT PLACES ON YOU	ROUT NG NUMBER MAY APPEAR IR CHECK