

**SECTION 8 LANDLORD
DIRECT DEPOSIT
AUTHORIZATION FORM**

I hereby authorize the Burlington Housing Authority to credit the bank account, as listed below, my monthly Housing Assistance Payment. Please find an attached voided check 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

“ATTACH VOIDED CHECK HERE”

