



Housing Authority of the City of Decatur, Georgia

750 Commerce Drive ▪ Suite 110 ▪ Decatur, Georgia 30030
404-270-2100 ▪ Fax 404-270-2122
TTD/TTY 1-800-545-1833 Ext 852
www.decaturhousing.org

Direct Deposit Information

Landlord/Owner Data

Name (Please Print)

Address

City

State

Zip

Phone Number

Email address for direct deposit
notification (35 character limit)

Social Security Number/Tax Identification Number

Financial Institution Data

Name of Financial Institution: _____

Routing Number: _____ Account Number: _____

Please attach a copy of a voided check for deposit to a checking account or a voided savings deposit slip for deposit to a savings account.

I hereby authorize the Housing Authority of the City of Decatur, Georgia, to initiate deposits and/or correcting entries to previous deposits to my account if necessary. I understand this authorization will remain in effect until a written authorization requesting cancellation is submitted to the Housing Authority in such a time and manner as to afford the Housing Authority a reasonable amount of time to act on it.

Signature

Date

Signature verifies that the above information is correct.