

Routing Transit Number:

Landlord Relief Program

Vermont State Housing Authority 1 Prospect Street Montpelier, VT 05602

Direct Deposit Authorization

PAF	RT 1: Transaction Type						
	New Setup			Change financial institution			
	Cancellation (Leave Part 4 Blank)			Change account number			
Г	Other			Change account type			
PAR	T 2: Payee Identification	I wou	ıld I	ike to receive correspor	ndence v	ria e-mail.	
Tax ID (Social Security Number or Employer Identification Number)			Wo	Work Phone Number		Home Phone Number	
Name			E-m	E-mail Address			
Address			City	City		tate Zi	p Code
I he spe to pay	T 3: Authorization for Setup, Cereby request and authorize the Vicified below and, if necessary, deborovide complete and accurate informents may be erroneously transfer	Vermont State Housing Au bit entries and adjustment formation on this authoriza forred electronically.	utho ts fo atior	r any amounts deposited elect n form, the processing of the	ctronically form may	in error. I recogni be delayed or tha	ze that, if I fail t my
	s authorization will remain in effect e for initiating or terminating Direc						
Autl	nuthorized Signature Printed Nat			me		Date	
PAR	T 4: Financial Institution <i>(Cont</i>	act your financial institu	utio	n for this information, if ne	ecessary.)	1	
Fina	Financial Institution Name City			State		Zip Code	
Тур	e of Account						
	Consumer Checking	Consumer Savings		Corporate Checking		Corporate Savin	gs

Please make sure all information is correct before sending. Incorrect information may result in a delay or non-payment of assistance. Including a voided check with this form is highly recommended to ensure accuracy.

Customer Account Number: