



Clermont Metropolitan Housing Authority

65 South Market Street | Batavia, Ohio 45103

513.732.6010 | Fax 513.732.6520

www.clermontmha.org

AUTHORIZATION FORM FOR DIRECT DEPOSIT

Name on Account: _____ SSN or TIN: _____

In Care of, or Doing Business As (If applicable): _____

Financial Institution: _____

Account Number: _____ Routing Number: _____

Type of Account- Checking: _____ Savings: _____

PLEASE STAPLE A VOIDED CHECK TO THIS AREA

Authorization:

I hereby authorize Clermont Metropolitan Housing Authority and the financial institution above to make direct deposits to my account. This authority will remain in effect until I have signed a new authorization or upon termination of participation.

Printed Name:

Date:

Signature

Email Address (where check details will be sent)

You may mail, fax, or email this completed form and voided check to:

Attention: B. Richardson
Clermont Metropolitan Housing Authority
65 S Market Street Batavia,
OH 45103

Email: brichardson@clermontmha.org

Fax: 513-732-6520