Salem & Keizer's Largest
Affordable Housing Provider

503-588-6368
TDD Users: Dial 711

Salem Housing Authority

360 Church Street SE
Salem, Oregon 97301

housing@cityofsalem.net
SalemHousingOR.com

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT (ACH CREDITS)

Property Owner/Management Agent Information & Authorization

Please print or type information below.

_____	_____
Owner Name	Management Agent Name
_____	_____
Federal Identification # (SSN/EIN/ITIN)	Federal Identification # (SSN/EIN/ITIN)
_____	_____
Owner Phone Number	Management Agent Phone #
_____	_____
Owner Email	Management Email

I hereby authorize the Salem Housing Authority to initiate direct deposits to the above account. This authorization will remain in effect until the Salem Housing Authority receives written notice to terminate and/or change. I understand that if my contact and/or banking information is not kept current, that my payments may be withheld until the correct information is received in writing.

PLEASE ATTACH A VOIDED CHECK

Direct Deposit Acct Information: ☐ Checking ☐ Savings

_____	_____
Financial Institution Name	Tenant Name
_____	_____
Bank Routing Number	Rental Property Address
_____	_____
Bank Account Number	City, State, Zip code

_____	_____
Authorized Signature	Date

Please submit via fax (503) 588-6465 or email rgarin@cityofsalem.net

NOTE: Deposits are authorized on the 1st business day on each month, if this day falls on a weekend, holiday or other closure day, the deposits will be authorized on the following business day.