



AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)

I (we) hereby authorize Loveland Housing Authority, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account / Savings Account indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provision of U.S. Law.

Depository Financial Institution Name: _____

City: _____ State: _____ Zip: _____

Routing Number: _____

Account Number: _____ Checking/Savings (circle one)

****Please attach a copy of a check for checking or deposit slip for savings.**

I agree to pay to the Housing Authority an insufficient funds fee of \$25.00 for each debit authorized by this Agreement which is dishonored by my Bank for whatever reason.

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable time to act on it.

If your form is received by the 1st your payment will be taken ACH for that month. If you prefer a different start date, please fill in "Start Date".

Start Date: _____

Name(s): _____

**Signature(s): _____ Date _____

Address: _____

Email: _____

Phone: _____

Program:

- Rock Crest Silver Leaf I Maple Terrace Willow Place
- Brookstone Silver Leaf II Cornerstone Dove Valley
- Meadows Lone Tree Talons Pointe Cleave Street
- The Pines The Pines HOA Century III Orchard Pl
- Mirasol Apt PI Mirasol HOA Mirasol Apt PII Mirasol Paired Homes
- Windsor Meadows Art Space The Edge
- Windsor Meadows PII Mirasol Event Center
- LAHIP LHOP

