HMHA
Hancock Metropolitan Housing Authority
1800 N Blanchard Street, Suite 114
Findlay, Ohio 45840
Phone: 419-424-7848 Fax: 419-424-7831 E-mail: hmhamain@hancockmetro.com

LANDLORD DIRECT DEPOSIT SIGN-UP FORM

To sign up for Direct Deposit, please complete Section 1 and attach a voided check.

SECTION 1 (COMPLETED BY PAYEE):

A NAME OF PAYEE (last, first, middle initial)	**C** TYPE OF DEPOSITOR ACCOUNT ☐ CHECKING ☐ SAVINGS
ADDRESS (Street, route, P.O. Box)	**D** DEPOSITOR ACCOUNT NUMBER
CITY STATE ZIP CODE	**E** ROUTING NUMBER
TELEPHONE NUMBER	**PAYEE/JOINT PAYEE CERTIFICATION** I certify that I am entitled to the payment identified and I authorize my payment to be sent to the financial institution named below to be deposited to the designated account.
B NAME OF PERSON(S) ENTITLED TO PAYMENT	SIGNATURE DATE SIGNATURE DATE

SECTION 2 (COMPLETED BY PAYER):

GOVERNMENT AGENCY NAME Hancock Metropolitan Housing Authority	GOVERNMENT AGENCY ADDRESS The Family Center-Suite #114 1800 North Blanchard Street Findlay, Ohio 45840

SECTION 3 (COMPLETED BY FINANCIAL INSTITUTION):

FINANCIAL INSTITUTION NAME AND ADDRESS	ROUTING NUMBER DEPOSITOR ACCOUNT TITLE

FINANCIAL INSTITUTION CERTIFICATION

I confirm the identity of the above-named payee(s) and the account number and title. As representative of the above-named financial institution, I certify that the financial institution agrees to receive and deposit the payment identified above in accordance with 31 CFR Parts 240, 209, and 210.

PRINT OR TYPE REPRESENTATIVE'S NAME	SIGNATURE OF REPRESENTATIVE	TELEPHONE	DATE

Equal Housing Opportunity