## **Direct Deposit Form**

Housing Choice Voucher Program (formerly Section8)

The Direct Deposit Form will need to be submitted if at any time a change occurs in your banking institution, ownership change and/or payee/managing agent. Please submit to <a href="mailto:landlordservices@fwhs.org">landlordservices@fwhs.org</a>. Please email any questions or concerns.



Property Owner Info				Managing Agent Info			
Owner Name:				Agent Name:			
Owner Address:				Agent Address:			
City, State Zip:				City, State Zip:			
Home Phone #:				Home Phone #:			
Fax #:				Fax #:			
Email Add	dress:			Email Addres	ss:		
Tax ID #/ SS #				Tax ID #/SS #			
Ba	ank Name:				Banking Information		
Ba	Bank Address:					Belongs To:	
Ba	ank Phone #:					Select only ONE of the following:	
Na Na	ame on the	the				Tollowing.	
	account:  Routing Number:					Owner	
HA K						Managing Agent	
74 AG	Account Number:		ount 22		00	Managing Agent	
AT	Select only ONE of the following:	Checking Account Savings Account			32		
Please note that the party receiving the n				onthly paym		e responsible for	
receipt of the 1099							
VIEW DETAIL STATEMENTS ONLINE AT http://www.fwhs.org **Select LANDLORD PARTNER PORTAL**							
	electronically into					ssistance payments will be VHS promptly should this	
Owner Signature Date  Property Owner must provide notarized form <b>ONLY</b> if the managing agent is the designated							
SIGNED appeared	BEFORE ME, the I known to me to b cknowledged to me	undersigned authority e the person who has s	, or sign	this day ed the forego	oing docum	s the designated payeepersonally ent, and after being duly oses and considerations	
SUBSCRIBED AND SWORN TO BEFORE ME THISDAY OF, 20							
County or	f:	Notary S	igna	ture:			
State of:		Seal:					

