



HOUSING AUTHORITY *of* JOLIET

TO: Housing Choice Voucher Program Landlords:

Please complete and return the following authorization form for the implementation of Direct Deposit payment remittance.

DIRECT DEPOSIT AUTHORIZATION FORM

I authorize the Housing Authority of Joliet to deposit the monthly Section 8 Housing Assistance payments, which I have earned in accordance with my Housing Assistance Payment Contract(s), to the bank and to the account that I have indicated below. This authorization will remain in effect until I notify the Housing Authority in writing of my intent to cancel direct deposit or until my Housing Assistance Payment Contract(s) are terminated.

Landlord/Owner's Name (Please Print)

Bank Name

Social Security # or FEIN

Bank Location (City/State)

Owner/Property Manager Mailing Address

Bank Transit or Routing Number (9 digits)

Owner/Property Manager City/State/Zip

Your Checking or Savings Account #

(Area Code) Phone #

Email Address (Please Print)

Signature

Date

Note: A copy of a voided check verifying your account information and a copy of your Photo ID must be submitted with this form.

Email documents to AP@HAJoliet.org or send to address listed below:

Housing Authority of Joliet
Attn: Accounts Payable
6 S. Broadway St
Joliet, IL 60436

Email AP@HAJoliet.org if you are interested in signing up for our landlord portal to upload documents, update contact information, review payments and more!