Richmond Redevelopment & Housing Authority
Mandatory Authorization of ACH/Direct Deposit

PLEASE COMPLETE THIS FORM AND RETURN WITH EITHER A VOIDED CHECK COPY OR A DIRECT DEPOSIT VERIFICATION LETTER FROM YOUR BANK TO:

Richmond Redevelopment & Housing Authority
Attn: Procurement and Contract Administration
600 East Broad Street, 4th Floor
Richmond, VA 23219
purchasing@rrha.com
FAX: 804-780-8712

PART 1: Transaction Type

__ New setup
__ Cancellation
*If you already participate in ACH/Direct Deposit this form is NOT required again.

__ Change financial institution
__ Change account number or account type
Already receiving Direct Deposit Payments

PART 2: Payee Identification

1. Owner Tax ID *(Social Security Number or Employer Identification Number)*	2. Work Phone Number		
3. Name	4. Home Phone Number		
5. Street Address	6. City	7. State	8. ZIP Code

PART 3: Financial Institution *(Contact your financial institution for this information, if necessary.)*

13. Financial Institution Name	14. City	15. State	16. ZIP Code
17. Routing Transit Number	18. Customer Account Number	19. Type of Account Checking Savings	

PART 4: Payee Identification

I (we) hereby request and authorize Richmond Redevelopment & Housing Authority to deposit payments by electronic funds transfer into the account specified below and, if necessary, debit entries and adjustments for any amounts deposited electronically in error. I recognize that, if I fail to provide complete and accurate information on this authorization form, the processing of the form may be delayed or my payments may be erroneously transferred electronically.

This authorization will remain in effect until Richmond Redevelopment & Housing Authority has received written notice to terminate the ACH/Direct Deposit transactions. **The undersigned must allow four to six weeks for initiating or terminating direct deposit and is responsible for notification of any change in financial institution information.** I (we) acknowledge that we will not receive a paper payment statement via US Mail. I will be required to log onto the landlord owner self- service website to view my (our) history of payments.

9. Authorized Signature	10. Print Name	11. Date
12. **Payee email address:**		

ACH/Direct Deposit Terms & Conditions

The submission of the Authorization of ACH/Direct Deposit Form authorizes Richmond Redevelopment & Housing Authority (RRHA) to electronically deposit payments through the Automated Clearing House (ACH) to the bank listed of the form. I hereby agree to the following terms & conditions:

1. This authorization of ACH/Direct Deposit will remain in effect until written notification is submitted to Richmond Redevelopment & Housing Authority to terminate the payment transactions.

2. In the event that you change your account or relocate to another bank, RRHA requires a 30-day advance notification to transfer your payments to your new account. Completion of a new Authorization of ACH/Direct Deposit Form is required.

3. All payments will be made in accordance with RRHA's standard payment terms for Housing Assistance Payments (HAP) or Vendor Payments. Advance notice will be given to all participants if payment terms are altered or changed.

4. *During the term of the Housing Assistance Payment (HAP) contract*, monthly HAP payments will be made at the beginning of the month.

5. RRHA reserves the right to initiate a reversing entry as permitted by the Rules of the National Automated Clearing House Association.

6. Your payment history also can be viewed on-line via the Owner Self-Service module.

7. RRHA has the right to change or terminate ACH/Direct Deposit services with proper advance notification to our landlords, customers or vendors.

8. **If you already participate in the ACH/Direct Deposit you do not need to complete the form again. Please just mark the box that indicates you already receive direct deposit payments from RRHA.**

If you have any questions about the terms & conditions, please feel free to contact the Procurement Department at purchasing@rrha.com .