

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED PAYMENTS

I hereby authorize TAUNTON HOUSING AUTHORITY, to initiate debit entries to my Checking or Savings account indicated below and the depository named below, to debit the same to such account.

BANK NAME: _____

ROUTING NUMBER: _____ ACCT NO.: _____

SELECT ONE: ☐ CHECKING ☐ SAVINGS
SELECT ONE: ☐ EXISTING ACCOUNT ☐ NEW ACCOUNT

This authority is to remain in full force and effect until the Taunton Housing Authority and the Bank receive notification from me of its termination in such time and in such manner as to afford Taunton Housing Authority and the Bank a reasonable opportunity to act on it.

Tenant Name: _____

Tenant Address: _____

Rent amount \$ _____ Repayment amount \$ _____ Total amount to be debited \$ _____
If Applicable

Effective Date _____

Signature _____ Date: _____