

Housing Choice Voucher Landlords and Vendor/Contractors

1. Complete the Direct Deposit Enrollment form on the back of the instructions. Indicate whether this is a "CHANGE" to an existing enrollment or "NEW" enrollment by checking the appropriate box. Enter all required information in sections I and II.
2. Check the type of account (checking or savings). For deposit to a checking account, attach an original voided check (deposit slips or temporary checks are **not** acceptable) for the checking account into which you would like Haslc to deposit the funds. Write "VOID" across the front of the check and blacken the signature portion of your check. If checks are unavailable, or for a savings account, please submit a letter from your bank to include the name on the account, account number and bank routing number.
3. Submit the completed form with your voided check or letter from your bank to the Housing Authority in person or by mail to:

**Housing Authority
of St. Louis County
Attention: Finance Dept.
8865 Natural Bridge
St. Louis, MO 63121**

John Doe 123 Shady Lane YourCity, AA 12345	2048 Date
Pay to the order of _____	Dollars
VOID	
YOUR SAVINGS & LOAN Anywhere, USA	
For _____	
⑆ 241022233	339622222 ⑆
↑ Routing Number 241022233 (9 digits)	↑ Account Number 339622222
	↑ Check Number 02048

4. To expedite the processing of your application, please complete all requests for information on the form. Any information omitted will delay the processing of your application.
5. Please allow 30 days for your Direct Deposit Enrollment form to be processed.
6. To avoid interruption in payments, written notification of all changes must be submitted to the Haslc Finance Department at least 30 days prior to payment date using the Direct Deposit Enrollment Form.

Housing Authority of St. Louis County

DIRECT DEPOSIT ENROLLMENT FORM

To enroll for Direct Deposit, the payee should fill in the information requested in sections I and II of the Direct Deposit Authorization Agreement, attach a **voided check** or letter from your bank and send to:

Housing Authority of St Louis County
Attention: Finance Dept.
8865 Natural Bridge
St. Louis, MO 63121
Email: accountspayable@haslc.com

DIRECT DEPOSIT AUTHORIZATION AGREEMENT – FOR AUTOMATIC DEPOSITS

NEW

CHANGE

Check the appropriate box above to indicate a “new” enrollment or “change” to an existing enrollment.

SECTION I – PAYEE INFORMATION

PAYEE NAME (must match payee on ownership paperwork)

OWNER/AGENT NUMBER (assigned by Haslc)

ADDRESS (STREET, P.O. BOX)

TELEPHONE NUMBER

CITY

STATE

ZIP CODE

EMAIL

Reminders: Please visit our website for additional information at www.haslc.com. Also, remember to register on Landlord portal to view your ledger activity, agency details, and unit inspections. For Finance questions, please email accountspayable@haslc.com or 314-227-3108. For Landlord online portal registration questions or information please email landlord@haslc.com.

NAME/COMPANY NAME (PLEASE PRINT)

SOCIAL SECURITY NUMBER

Enter your Employer Identification Number (EIN) in the appropriate box to the right. The EIN provided must match IRS Form W-9. Individuals without an EIN should enter their social security number.

EMPLOYER IDENTIFICATION NUMBER

SIGNATURE

DATE

SECTION II – FINANCIAL INSTITUTION INFORMATION

BANK NAME

ROUTING NUMBER

CITY

STATE

ZIP CODE

ACCOUNT NUMBER

TYPE OF ACCOUNT (SELECT ONE): CHECKING SAVINGS