



**HOUSING AUTHORITY
OF WASHINGTON COUNTY**

319 E. Antietam St., 2nd Floor
P. O. Box 2944, Hagerstown, Maryland 21741-2944
Telephone/TTY: 301-791-3168
FAX: 301-791-2755

To: Section 8 Landlords
Subject: Conversion to Direct Deposit payment method

The Housing Authority of Washington County offers the Direct Deposit option for Section 8 rental assistance payments to landlords. After several years in use, this method has proven to be very successful. Direct Deposit of the money we owe you has the advantages of being TIMELY and SECURE. With Direct Deposit the full rental assistance will be paid into your bank account on the 1st business day of each month. We offer Direct Deposit at NO extra cost to you. Direct Deposit also allows you the flexibility of having the deposit go to either your checking or savings account. The account number you give us is where the money will go. For us the Direct Deposit process is more efficient, helping us curtail administrative costs in the Section 8 program.

Please complete the authorization agreement at the bottom of the page and return to the Housing Authority offices at 319 East Antietam Street, 2nd Floor, or mail to P. O. Box 2944, Hagerstown, MD 21741-2944. Unsigned or incomplete agreements will be returned. This information is required in order for you to have Direct Deposit. You will receive printed rent checks until your Direct Deposit authorization is received. The ABA# is imprinted on the bottom of checks between two colons. On business checks the first set of numbers is the check number, followed by the ABA number and then your account number. On personal checks the ABA# is the first set of numbers. If you are unsure of the depository's information, please contact them directly.

Section 8 Direct Deposit Authorization

I hereby authorize the Housing Authority of Washington County to (1) initiate credit entries (deposits) to my account number indicated below at the depository named below and (2) to initiate, if necessary, debit entries or adjustments for any credit error.

Bank Name: _____

Bank Address: _____

Transit/Routing ABA# _____ Account Number _____

Type of Account (check one only) Checking [] Savings []

Landlord Name – Please Print

Date

Landlord Signature

Taxpayer ID Number

