



57 East Main Street  
 Columbus, OH 43215  
 www.ohiohome.org

### Authorization Agreement For Direct Deposit - Automated Clearing House

1. Type or Print the information requested, sign, date and return to the Ohio Housing Finance Agency (OHFA).
2. Include a Voided Check for the account.
3. Any address or account changes must be reported to OHFA 30 days prior to the actual change.

<b>SECTION I</b>														
A. Type of Transaction:	<input type="checkbox"/> ADD	<input type="checkbox"/> CHANGE	<input type="checkbox"/> DELETE											
B. Name of Company	County	(Area Code) Telephone Number												
Address	City	State	Zip Code											
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>														
C. Federal Tax ID number														

<b>SECTION II</b>																			
A. Financial Institution Name	County	(Area Code) Telephone Number																	
B. Type of Account:	<input type="checkbox"/> Savings	<input type="checkbox"/> Checking																	
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>																			
Transit routing/ABA Number																			
C.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>																		
Account Number at Above Institution																			

Whereby authorize the Ohio Housing Finance Agency to initiate credit entries to our account in the financial institution identified above and also debit entries, if necessary, for any credit entries that are determined to be in error. We additionally authorize the financial institution to credit or debit the same to our account.

This authority is to remain in effect until revoked by us in writing to the Ohio Housing Finance Agency or until terminated by the Ohio Housing Finance Agency.

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Typed Name

\_\_\_\_\_  
 Date

**Instructions for Completing the Authorization Agreement: Direct Deposit - Automated Clearing House form**

Section I:

- A. Place a check-mark to indicate the type of transaction.  
"Add" indicates a **new** authorization.  
"Change" indicates a **change** to an existing authorization  
"Delete" indicates a request for **termination** of direct deposit.
- B. Enter the complete name and address of the company participating in the direct deposit.
- C. Enter the company's Federal Tax Identification number as it appeared on the Funding Agreement, W-9 Form or other document submitted during the approval process.

Section II:

- A. Enter the name and address of the financial institution authorized to conduct the transaction.
- B. Place a check-mark to indicate the type of account to which the funds are to be deposited.  
Enter the financial institution's Transit Routing/ABA number in the spaces provided. This is typically a nine digit number shown on the check. It may also be obtained by contacting the financial institutions and requesting the Transit Routing/ABA number.
- C. Enter the account number to which the direct deposit is to be accredited. If less than 15 characters are needed, begin at the box furthest to the left and leave any unused spaces blank.

Forward the signed authorization form **and a copy of a voided check from that account** to:

Karen M. Banyai  
Planning Preservation & Development  
Ohio Housing Finance Agency  
57 East Main St.  
Columbus, OH 43215