

**LOS ANGELES COUNTY DEVELOPMENT AUTHORITY  
AUTHORIZATION AGREEMENT FOR AUTOMATIC DEPOSIT**

The Los Angeles County Development Authority (LACDA) is consistently looking for ways to better serve our owners/landlords. To provide monthly payments in a timely manner, **ALL** Housing Assistance Payments (HAP) are made by direct deposit. It is mandatory for all owners/landlords to have their information back to us IMMEDIATELY. The direct deposits will be automatically deposited into your designated bank account on the first\* of every month.

(\*If the first of the month is a weekend or holiday, payment will be released on the next business day.)

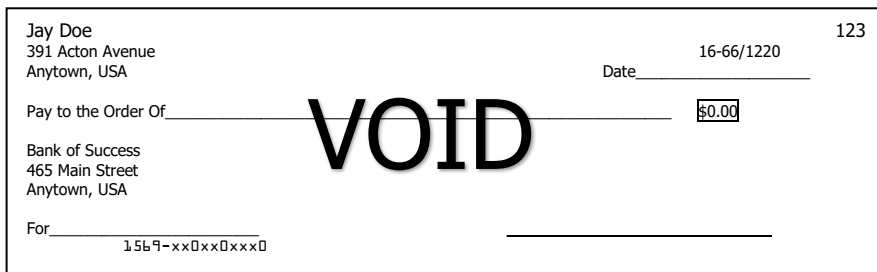
**To sign up for Direct Deposit...**

**Choose an Account:**

- ✓ *Checking account*, attach a voided check for the account into which you would like LACDA to deposit the payment. **NOTE: Deposit slips will not be accepted.**
- ✓ *Savings account*, please obtain the correct transit routing number and account number from your financial institution.

1. Return this form (with your voided check if applicable) to LACDA by:

Mail: ATT: Ownership Services, P.O. Box 1503, Alhambra, CA 91802 or by email to Owner.Services@lacda.org.



**To make a change for Direct Deposit...**

1. Written notification of all changes must be submitted to LACDA at least 20 days prior to payment date.
2. Follow the instructions above to submit your new information.

**Direct Deposit for Vendors**

By acceptance of the funds through direct deposit, the owner certifies that to the best of his/her knowledge the dwelling unit is in decent, safe, and sanitary condition; the contracting family is in the unit and is expected to be there the entire month; the deposited amount is in accordance with the provisions of the HAP contract and is payable under the HAP contract; and all other facts and data on which this amount is based are true and correct.

**Check One**  New Direct Deposit Sign-up  Change to an Existing Direct Deposit

**Tenant/Unit Address** \_\_\_\_\_  
\_\_\_\_\_

**Designated Account**  Savings  Checking

**Routing Number** \_\_\_\_\_ **Account Number** \_\_\_\_\_

*By signing below, I hereby authorize LACDA to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to our account designated below:*

**Owner/Payee Name** \_\_\_\_\_ **Soc. Sec. No./** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Tax ID No.** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Date** \_\_\_\_\_

**Owner/Payee Name** \_\_\_\_\_ **Soc. Sec. No./** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Tax ID No.** \_\_\_\_\_

**Phone Number** \_\_\_\_\_ **Date** \_\_\_\_\_

**Anyone submitting fraudulent information is subject to fine or imprisonment. Title 18 U.S.C. 1001**

**Office Use Only** Tenant ID: \_\_\_\_\_ Vendor No.: \_\_\_\_\_ Date Entered: \_\_\_\_\_