



HINGHAM HOUSING AUTHORITY

30 THAXTER STREET
HINGHAM, MASSACHUSETTS 02043

James N. Marathas
Executive Director
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AUTHORIZATION AGREEMENT FOR PREAUTHORIZED PAYMENTS (ACH DEBITS)

Company Name: Hingham Housing Authority
Company ID #: 046263709

I (we) hereby authorize the Hingham Housing Authority, hereinafter called the COMPANY, to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error, to my (our) Checking () Savings () account indicated at the depository named below, hereinafter called DEPOSITORY, to credit and/or debit the same to such account.

DEPOSITORY Name: _____

BRANCH: _____

CITY, STATE, ZIP: _____

ROUTING NUMBER: _____

ACCOUNT NUMBER: _____

Please attach a voided check for checking account or bank authorization for a savings account.

This authorization is to remain in full force and effect until COMPANY has received written notice from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s): _____

Signature(s): _____

Date: _____

Date: _____

Email address: _____

******MONTHLY DIRECT DRAFT OF RENT, ADJUSTED AS NECESSARY, ON THE 4TH OF EACH MONTH – OR THE FIRST BUSINESS DAY THEREAFTER******



EQUAL HOUSING OPPORTUNITY