

***ATTENTION
TEMPLE HOUSING AUTHORITY
RESIDENTS***

Central Texas Housing Consortium residents are able to have their rent payments and any other charges automatically drafted out of their checking or savings account.

To sign up for automatic draft, please submit the attached form and a voided check or deposit slip to the Temple Housing Authority office.

Forms turned in between the 1st and the 25th of the month will take effect immediately the next month.
Forms turned in between the 26th and the end of the month will take effect the following month.

Examples:

Form turned in January 23 will be effective February 1 for drafting.
Form turned in January 26 will be effective March 1 for drafting.

Payments will draft out of the account by the 5th of each month.
If the 5th falls on a weekend,
payment will draft the last business day of the prior week.

Drafts that are returned for insufficient funds will have a \$35 fee plus late charges assessed AND residents will not be eligible for the automatic draft for one year.
Personal check privileges will also be removed for one year;
only money orders or cashier's checks will be accepted.




CENTRAL TEXAS HOUSING CONSORTIUM

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS

I (we) hereby authorize **Temple Housing Authority**, herein after called COMPANY, to initiate debit entries to my (our) Checking Account / Savings Account (**select one**) indicated below at the depository financial institution named below, hereafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

This authorization is to remain in full force and effect until COMPANY has received written notification 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.

Drafts that are returned for insufficient funds will have a \$35 fee plus late charges assessed AND residents will not be eligible for the automatic draft for one year. Personal check privileges will also be removed for one year; only money orders or cashier's checks will be accepted.

Name(s) _____
(Please Print)

Address _____

Signature _____

Date _____

STAPLE VOIDED CHECK HERE



FOR OFFICE USE ONLY:

Tenant ID # _____

Received by (initials): _____

Copy to Housing (date) _____