



# Maiker Housing Partners

3033 W. 71st Ave, Ste 1000  
Westminster, Co 80030  
303-227-2075

## DIRECT DEPOSIT AUTHORIZATION

I authorize Maiker Housing Partners (Unison) and the financial institution below to automatically deposit my payments into my account.

This Authorization will remain in effect until I give written notice to Unison's Accounting Department to discontinue.

NEW BANK INFO

UPDATE/REVISED BANK INFO

PLEASE PRINT CLEARLY

\_\_\_\_\_  
*Owner/Tenant/Agent Name (as shown on tax returns & W-9)*

\_\_\_\_\_  
*Phone #*

\_\_\_\_\_  
*Doing business as (make payments to)*

\_\_\_\_\_  
*Employer ID/Tax ID  
Or Social Security #*

\_\_\_\_\_  
*Financial Institution (Name of Bank/Credit Union)*

\_\_\_\_\_  
*Bank Routing Number (9 digits at bottom left of check)*

\_\_\_\_\_  
*Account Number (shown after the routing number)*

Account Type:     Checking-attach void check     Savings- attach deposit slip

Email Address: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_    DATE: \_\_\_\_\_

**Attach Voided Check Here (Required)**

**Be Sure to Attach W-9 (Required)**

Please mail, e-mail the completed forms to:

[svaughn@maikerhp.org](mailto:svaughn@maikerhp.org) or [vruiz@maikerhp.org](mailto:vruiz@maikerhp.org)

Please contact the Housing Specialist assigned to the tenant for any other housing related questions or concerns.

**HA use only:**

Information received by HCV Department: \_\_\_\_\_

Information received and input by accounting: \_\_\_\_\_

Date: \_\_\_\_\_

Vender code \_\_\_\_\_