

# Chicora Annual Rentals Direct Deposit Authorization Form

- ADD – Deposit my pay to the account shown  
 CHANGE – Change financial institution and/or account number

Name \_\_\_\_\_ SSN # \_\_\_\_\_ - -

**YES!** I wish to have Chicora Annual Rentals deposit my Rental Income amount each month directly to my account at the financial institution shown below. I agree to notify Chicora Annual Rentals immediately of any changes to the information so that my Rental Income may be properly distributed. I also understand that if corrections in the credit amount are necessary, it may involve an adjustment (credit or debit) to my account.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Signature (Required) Date

Name of Financial Institution \_\_\_\_\_

Branch (City and State) \_\_\_\_\_ Checking (C)   
Savings (S)

Bank Routing (ABA) Number \_\_\_\_\_ Bank Account Number \_\_\_\_\_

Please staple to the original form a Voided Check (Checking Account) from your Financial institution and account.

STAPLE HERE