



CHATTANOOGA HOUSING AUTHORITY

Return form to: 801 North Holtzclaw Ave. Chattanooga, TN 37404

Fax: (423) 752-4833 Email: tcarpenter@chahousing.org

Substitute W9 & Direct Deposit Form

Transaction Type: New Set-up Update Info Add ACH/Bank Info Update ACH/Bank Info

Payee Information:

Individual/Company/Entity Legal Name: _____

Taxpayer ID:

◆ ◆

Social Security Number

OR

◆

Employer ID Number

DBA Name (If applicable) _____

Tax Classification: (check only one of the seven boxes)

- Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate
- Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) _____ Other Exempt payee code _____
- Note.** For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

Contact Information:

Phone:	Email:	
Address:	City:	
	State:	Zip:

Certification:

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

Signature of U.S. Person:	Date:
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Direct Deposit Setup Information-Please fill out all fields to receive direct deposit:

I hereby authorize CHATTANOOGA HOUSING AUTHORITY (CHA), to initiate credit entries to my account indicated below and the depository named below:

Account type: <input type="checkbox"/> Checking OR <input type="checkbox"/> Savings		
Bank Name:	ABA Routing # (9 digits) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Account #:
Signature:	Name:	Date:

The authority granted herein shall continue to be in full force and effect until CHA receives written notice of its termination, provided such notice is given in a timely and reasonable manner to allow CHA and the DEPOSITORY to act on it. Additionally, for any changes to direct deposits, we will also contact you using the phone number provided on the form as an additional confirmation. Please note that changes to direct deposits may take up to two check runs, which is approximately one month.