



Sac City Rentals

8937 Elk Grove Blvd.

Elk Grove, CA 95624

Phone: 916-835-7482 / Fax: 916-647-9885

Direct Deposit Authorization Form

**Exact Name as it Appears
on Account:**

**Today's
Date:**

Account Number:
(Please confirm)

**Bank Routing
Number:**

(Please specify) Circle one:
Checking or **Savings**

**Name of
Bank:**

Email Address:

Is this Account a: Personal Account or Business Account?

Please attach a VOIDED CHECK to ensure proper account set up.

Rental Property Address: _____

The owner listed above hereby Authorizes *Sac City Rentals* to directly deposit his/her rent proceeds into the specified account above, effective immediately. Owner understands this process may take up to a week to set up the deposit and verify the account information provided. Your Monthly Statements will be sent to you via your Owners Portal and you will receive and email notification when your rent proceeds have been deposited into your account, (unless paper statements each month have been requested).

Please complete this form and return it to our confidential fax at: (916) 647-9885.

Thank you for your business!

Owner's Signature: _____ *Date:* _____

CONFIDENTIAL