



washingtonsavings.com



### Tenant Escrow Services Request Form

Telephone: 978-569-1603 Fax: 978-458-9547

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Please print legibly or type information

Jen Valadao, Deposit Services Manager

<b>Date:</b>	
<b>Principal/ Lanlord Information (complete in full):</b>	
Name:	<b>Master Account Number</b>
Address:	Telephone Number
	Fax Number

<b>Authorized Representative Information:</b>	
Name:	Authorization Code:

Tenant Sub-Account Number if new account, leave blank	Tenant Name	Tenant Tax ID Number	BLG & Apt		Deposit	X new acct (W9 Rqd.)	X yrly. int. check	Withdrawal	X to close
			if applicable						

<b>Internal Use Only</b>			
Rcd. Date: _____	Rcd. By: _____	Field 019: _____	Combined: _____
Processed Dte: _____	Processed by: _____		