APPLICANT CHANGE FORM (Public Housing)

Dear Applicant:

The following information is needed **ONLY** if there has been a change in your address, family composition, income, current housing or living arrangements.

PLEASE PRINT a	and complete	entire form			
Applicant Name: _ Current Address: _			SSN_		
Phone Number(s): Check the box that		Work # Application Change:		_ Other/Message #	

□ My **mailing address** has changed. My new mailing address is:

□ My **family composition** has changed. My new family composition is as follows:

Name	MI	Relationship	Sex	Age	SSN	DOB

Please Note: If you are removing a family member from your application, please indicate the reason why:

□ My *housing situation* has changed. My new housing information is as follows:

Are you now living in Public Housing or HUD subsidized Housing?
Yes No If yes, please tell us where?

□ My *family income* has changed. My new family income is as follows:

Please update your income: Employment, Unemployment Comp, Social Security, SSI, TANF, Direct Contributions, etc.

 <u>NEW</u>
 Employer:

 Phone No#______

Address.			
		Rate of pay: \$	(Hourly)
Hours per week:	_ I get paid: □Weekly	□Bi-Weekly □Monthly	•
FORMER Employer:		Phone No#	
Address:		Last date of work:	
Reason for leaving employment:			
Other changes in family income (explain):		

WARNING:

Section 1001 of Title XVII of the United States Code makes it a criminal offense to make willful gales statement or misrepresentations to any department or agency of the Unity States as to any matter within its jurisdiction. I certify that the above information is correct and I understand that any misrepresentation will be grounds for denial or termination with the Section 8 Housing Choice Voucher Program or Public Housing Program.

	Date	_
Client's Signature		

Foley Housing Authority 302 W. Fourth Avenue Foley, AL 36535