

REQUEST OF CHANGE IN FAMILY COMPOSITION

HEAD OF HOUSEHOLD'S NAME: _____ DATE: _____

SITE NAME: _____ UNIT #: _____

TEL.: _____ EMAIL: _____

➤ REMOVE FROM HOUSEHOLD (Please provide full name & new address of person being removed.)

NAME (FIRST & LAST): _____

NEW ADDRESS: _____

REASON: _____

➤ ADD TO HOUSEHOLD (Please provide full name of person being added and complete all fields.)

NAME (FIRST & LAST): _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____ GENDER: MALE FEMALE

RELATIONSHIP TO HEAD OF HOUSEHOLD: _____

Does this person have **ANY** source of income? Yes No

Does this person have **ANY** dependents? Yes No

Reason: _____

Please attach supporting documents of proof. If documents are not provided, the request WILL NOT be processed.

➤ ADDING 18 YEARS OR OLDER:

- Change of Family Composition Form
- Proof of Income
- Birth Certificate

- Social Security Card
- State picture ID (must be valid)
- U.S. Declaration of Citizenship Form

- HUD Authorization of Release of Information Form
- Criminal Background Form
- Disposal of Assets Form

➤ ADDING UNDER 18 YEARS OF AGE:

- Change of Family Composition Form
- Social Security Card

- Birth Certificate
- U.S. Declaration of Citizenship Form

- Court Awarded Document (notarized letter or Power of Attorney not acceptable)

➤ REMOVING OVER 18 YEARS:

- Change of Family Composition Form
- Death Certificate/Obituary

- Copy of updated State ID or utility bill for removed family member showing his/her new address

- Lease or letter from new owner/manager showing removal from household

➤ REMOVING UNDER 18 YEARS OF AGE WITH INCOME:

- Proof of Address
- Proof of Beneficiary Change (Child support, SSI, TANF)

- Change of Family Composition Form
- Death Certificate/Obituary

➤ REMOVING UNDER 18 YEARS OF AGE WITH NO INCOME:

- Change of Family Composition Form
- Death Certificate/Obituary

IMPORTANT: We must receive your written notice of a change in family composition within 10 business days of the change. If this form is not filled out and/or supporting documentation is not attached, the review may be delayed until adequate documentation of the change has been verified. If changes are reported late or not at all, you may owe for back rent and you may risk losing your housing subsidy.

I, (print head of household's name) _____, hereby acknowledge that the rent amount may change and I could be required to move to a different unit at the site as a result of a change in family composition. I also authorize owner/manager to verify the information provided by me on this form. I understand that if this form is not completely filled out and/or supporting documentation is not attached, the review may be delayed. I understand that such verification may include contacting any appropriate governmental agencies, employers, or individuals identified on this form or in the supporting documentation.

HEAD OF HOUSEHOLD'S SIGNATURE _____ DATE _____