

CHANGE OF ADDRESS FORM

Dear Applicant/Participant:

The following information is needed ONLY if there has been a change in your mailing address. PLEASE PRINT and complete the entire form.

(This form will be used for this office only and will not serve as notice to the U.S. Postal Service)

NAME: _____ SSN _____

PREVIOUS Address: _____

NEW Address: _____

Phone Numbers: Home # _____ Work # _____

Cell/Other # _____

- **Section 8 Participants MUST use the physical address of the unit for which the rental subsidy is paid as the mailing address.**

WARNING:

Section 1001 of Title XVII of the United States Code makes it a criminal offense to make willful false statements or misrepresentations to any department or agency of the United 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.

Client's Signature

Date