

REQUEST FOR CHANGE IN RENT/FAMILY COMPOSTION

NAME: _____

ADDRESS: _____



I request a change in my rent and/or family status for the following

I certify that my family composition is the same as previously reported or has changed as noted below: (Write "SAME" if there no change)

Name/Relationship	Date of Birth	Soc. Sec. No.	Birthplace

NOTE: Other than birth, lease additions require police background checks AND Authority's approval.

CURRENT OR NEW FAMILY INCOME

Name/Relationship	Source of Income	Amount per Week/month/check
CHILD CARE:		

NOTE: Income changes must exceed 30 days to be effective.

I certify that the information which I have provided to the Housing Authority of the County of Chester is true to the best of my knowledge and belief. All other information concerning my family composition as noted in my files have remained the same.

ESTIMATED NEW RENT: \$ _____ EFFECTIVE _____

TENANT INSTRUCTIONS

Tenant Phone

Date of Report

Request Taken By