

INSTRUCTIONS
CHANGE OF INFORMATION FORM

1. You may use this form to report all changes income or family composition to the Authority. Applicants may also use this form to report a change of address.
2. Print out the attached form. On the top part of the form make sure you provide your Name, last four digits of your Social Security Number, Address, email (if you have one) and telephone number. Next indicate if you are either a housing applicant, a resident of an Authority development, or a Section 8 participant.
3. In the center section sign and date the form. Then indicate the type of change you are reporting: change in income; change in family composition; change in medical or childcare expenses; or a change in address (applicants only).
4. On the blank lines at the bottom of the form, provide any additional information needed to describe the change. For example if you are reporting a change in family composition, provide the name, birth date, social security number and relationship of the person moving in or out of your household.
5. Return the completed form by mail to: Lebanon County Housing Authority, Attn: Occupancy Department, P.O. Box 420, Lebanon, PA 17042.
6. You will receive a copy of the form back in the mail from us as proof that you reported the change. If you do not receive a copy from us with two weeks, contact the Authority to make certain we received the form. If you do not receive a copy back in the mail, **DO NOT ASSUME WE RECEIVED YOUR FORM!**
7. If you have any questions about the form, contact the Authority's Occupancy Department at 717-273-1639 or by email: info@lebanoncountyhousing.com

**Lebanon County Housing Authority
Applicant/Participant Change of Information**

This box for Authority use only
Received by: _____ Date Received: _____

Your Name: _____ Last four digits of your social security number: _____

Address: _____

Email : _____ Telephone: _____

(please check one of the lines below that describes your current status)

- _____ I am an applicant for a housing program.
- _____ I am currently a resident in an Authority owned or operated development (not Section 8).
- _____ I am currently a participant in the Section 8 program.

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I am reporting a change in my family's circumstances as described below. I understand that the Authority will use the information provided by me to determine my level of benefits and/or program eligibility. I understand that the Authority may verify the information I have provided with a third-party. I certify that the information provided above is true and correct to the best of my knowledge and belief. I understand that providing false information may be cause of denial or termination of housing assistance and may be punishable under federal law.

Your Signature: _____ Today's Date: _____

(check any of the lines which apply to the change you are reporting)

- _____ There has been a change in my family's income.
- _____ There has been a change in my family's composition (who lives with me).
- _____ There has been a change in my family's medical or childcare expenses.
- _____ I am an applicant for housing and want to report a change in my address.

On the lines below please describe in detail what has changed. For example if someone moved in or out of your home list their name, social security number, birth date and relationship to you. If you have an increase or decrease in your income provide the name of the income provider (for example the place you work), the date the income started or stopped, if employed, the hours worked each week, how much income is received each month. If you're an applicant and reporting a change of address please list your old and new address, and make sure you provide us with your updated telephone number.

