

LEXINGTON HOUSING AUTHORITY
ONE COUNTRYSIDE VILLAGE, LEXINGTON, MASSACHUSETTS 02420-2576



CAILEEN B. FOLEY, EXECUTIVE DIRECTOR

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U.S. Department of Housing and Urban Development
CHANGE OF ADDRESS REQUEST - 地址要求的变化
FEDERAL-AID HOUSING/SECTION 8

Current Applicant Information: 当前申请人信息

Name: _____ Last name: _____
名字 姓氏

Previous Address: 上一地址:

City: _____ State: _____ Zip Code: _____

New Address: 新地址:

City: _____ State: _____ Zip Code: _____

I authorize Lexington Housing Authority to change my address.
我授权列克星敦房屋委员会更改我的地址。

Signature of the Applicant: _____
申请人的签名