

CAILEEN B. FOLEY, EXECUTIVE DIRECTOR



TEL 781 861-0900
 FAX 781 861-1938
 TDD 1-800-545-1833 EXT 104

CHANGE IN FAMILY COMPOSITION – REMOVING / ADDING A HOUSEHOLD MEMBER

**THINGS TO KNOW BEFORE REPORTING
 A CHANGE IN HOUSEHOLD COMPOSITION**

- **Before the Change Is Processed:**
 - All documentation/verification must be received and completed before a change is processed.
 - Additional family member may not be added to the lease until approved by landlord and the PHA.
- **Your Responsibility:**
 - As the head of the Household, you understand that you are required to report in writing any change in your family composition, or any change in your income, within 30 days when the change occurred. Any misrepresentation of your family’s circumstance to the Housing Authority could result in termination of your housing assistance.

I, _____, certify that the individual listed below will be residing at my address or
 (Print Name)
 will no longer reside at my address as of the listed move-out date.

Name	Relationship	New Address	Phone #	Move Out Date

Confirmation of the former household member’s new permanent address is required.

Please submit this form along with one of the following forms of applicable verification:

- Copy of a new signed and executed lease;
- Court correspondence dated within 60 days;
- Utility bill, not more than two months old, bearing the member’s new address;
- Bank statement, not more than two months old, bearing the member’s new address;
- Copies of divorce or legal separation actions;
- Order of protection or restraining order;
- Auto insurance policy for current year;
- A court document verifying custody of the minor(s) who is being removed (if applicable);
- Verification from a school or medical provider that the minor now resides at a different address (if applicable).
- Unable to obtain verification.

I do hereby swear and attest, under the pains and penalties of perjury, that all of the information provided on this form is true and accurate. I understand that under Federal law it is considered a felony to knowingly and willingly make a false or fraudulent statement to a government agency.

Signature of Head of Household: _____ Date: _____

 Notary Public Signature

Name: _____ My commission expires: _____

