

**Tarrant County Housing Assistance Office
Wait List Change Form**

Changes in legal or mailing address and/or telephone number must be reported within ten days of the change to maintain your waiting list status.

Applicant Name: _____

Contact Information				
Address:	(Number)	(Street)		
	(City)	(State)	(Zip Code)	
Home Telephone:	_____			
Other Telephone:	_____			
Other Telephone Type:	<input type="radio"/> Work	<input type="radio"/> Cell	<input type="radio"/> Relative	<input type="radio"/> Other: _____

Head of Household Information	
Soc. Sec. #: _____	Date of Birth: _____
Are you disabled?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If YES what was the effective date:	_____
NOTE: IF YOU ARE NOW DISABLED YOU MUST PROVIDE DOCUMENTATION (I.E. SOCIAL SECURITY AWARD LETTER, ETC.)	

Client Certification: I declare, under penalty of perjury, that the above information is true and complete. *(Warning: Section 1001 of Title 18 of the U.S. 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.)*

HOH Signature

Date