

KIAMICHI HOUSING AUTHORITY

HOUSEHOLD CHANGE FORM

Head of Household: _____ Phone Number: _____

Add Household Members:

Provide information below and attach documentation required; such as, birth certificate, court awarded custody or adoption papers, live-in aide verification, etc. **Approval to add a household member will be granted according to BHA Administrative Plan.**

Name	Birth Date	Social Security #	Relationship	Race	Gender	Disabled
					M F	Yes No
					M F	Yes No
					M F	Yes No

Remove Household Members:

Provide information below and attach documentation: i.e. new lease, rent receipt, utility bill, etc.

Name	New Address	Contact #

I declare, under penalty of perjury, that the above information is true and complete.

Signature of Head of Household

Date