



Housing Choice Voucher Program

200 Washington Street
 Huntsville, AL 35801
 Mail: P.O. Box 486
 Huntsville, AL 35804

TEL: 256.539.0774 FAX: 256.539.5982 TTY: 800.545.1833, Ext 903

REQUEST TO ADD AN ADULT

Program Requirements:

- Huntsville Housing Authority is required to screen and approve all adults for program eligibility before they move in to your household.
- Landlords must approve adding the new adult to your lease before Huntsville Housing Authority can add the adult to your household.

Instructions:

- Please return this form with the documents listed below.

Name:

Last 4 digits of SSN:

Address:

Phone:

Email:

Name of adult to be added to household:

What is this person's relationship to the Head of Household?

Previous Address:

Please have the adult to be added complete and return the following items to Huntsville Housing Authority:

- Huntsville Housing Authority Authorization for Release of Information
- HUD Authorization for Release of Information/Privacy Act Notice HUD Debts Owed to Public Housing Agencies and Terminations Statement of Family Obligations
- Certification of Citizenship Status
- Verification of Income dated within the most recent 60 day (*such as paystubs, copy of a benefit award letter, or Verification of Employment Status completed by employer*)
- Statement of Zero Income (*if applicable*)

Please attach copies of the following items:

- Valid Photo ID (*must be current*)
- Copy of Birth Certificate
- Copy of social security card or verification of name and SSN by Social Security Administration, or document issued by a federal, state, or local government agency with name and full SSN.

Participant Certification

I/we do hereby swear and attest that all the information reported on this form about the household and me is true and complete. I/we understand that Huntsville Housing Authority is required to verify the information that I/we have reported. I/we understand that any misrepresentation of information, or failure to disclose information requested, may be grounds for termination of assistance and is punishable under Federal law.

WARNING: Title 18, Section 1001 of the United States Code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department or agency of the United States.

Signature of Head of Household:

Date:

Signature of Adult to be Added:

Date: