

CHANGE OF HOUSEHOLD COMPOSITION PACKET: INSTRUCTIONS TO **REMOVE A MEMBER**

Participant:

In an effort to ensure you and your household are served in a timely manner, we are requesting that you completely fill out and sign every document in the enclosed packet within 10 days. **Warning:** Failure to report a change of income or household composition in writing within 10 days could result in the termination of your housing assistance.

To remove a member of your household, you must enclose the following:

- a. Statement providing new address information for each household member being removed

Complete and return all the attached forms:

- a. COFC Removal Form
- b. Statement stating the change you are requesting

Failure to submit the required documentation may delay your request to remove a member to your household.



The following person has been designated to coordinate compliance with the nondiscrimination requirement contained in HUD's regulations implementing Section 504: **Michelle Finch, 818 S. Flores, San Antonio, Texas 78204.**

SAHA
818 S. Flores St.
San Antonio, TX 78204
210.477.6000 | saha.org





CHANGE OF HOUSEHOLD COMPOSITION – REMOVE A MEMBER

| Head of Household Information |
|---|
| Head of Household Name: _____ Date: _____ |
| Last 4 of SSN: _____ Email: _____ |
| Home Phone: _____ Cell Phone: _____ |
| Address: _____ City, St Zip: _____ |

| Household Member Being Removed From The Unit |
|--|
| Name: _____ Move-Out Date: _____ |
| New Address (if unknown, N/A): _____ |
| City: _____ State: _____ Zip Code: _____ |
| Contact Phone: _____ Email: _____ |

Warning: 18 U.S.C. 1001 provides, among other things, that whoever knowingly and willfully makes or uses a document in writing containing false, fictitious or fraudulent statements or entries in any matter within the jurisdiction of a department or an agency of the United States shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

By signing below, I am certifying under penalty of perjury that the information above is true and correct.

Head of Household Signature

Date



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