

**INTERIM/CHANGE REPORT FORM**

NAME \_\_\_\_\_ SOCIAL SECURITY # XXX – XX- \_\_\_\_\_ (LAST 4 ONLY)  
 ADDRESS \_\_\_\_\_ HOME TELEPHONE \_\_\_\_\_  
 CITY, ST & ZIP \_\_\_\_\_ WORK TELEPHONE \_\_\_\_\_  
 PARISH \_\_\_\_\_

I. **CHANGE IN FAMILY COMPOSITION:** - List only names of individuals who have moved out or you are requesting be added to your household

Name of Household Members	Relationship To Head of Household	Sex	Race	Date of Birth	Social Security Number	Date member Moved out of Unit (if applicable)
1.						
2.						
3.						

II. **CHANGE IN INCOME SOURCES:** - (Complete all sections that apply to your household – include all income received in the last 30 days. If you no longer receive an income, write “No longer receive” next to the appropriate box)

Include income received by or for all household members, including minors.	Name of Person Who Receives Income	Income Amount	Indicate How Often (Weekly, Bi-weekly, Monthly etc.)	
Welfare/TANF/Cash Aid				
Social Security Benefits				
Supplemental Security Insurance (SSI)				
Wages** <u>Complete Employer contact field below</u>				
Regular Contributions From Spouse, Relative, Friend (Money or Goods)				
Self-Employment				
Unemployment Compensation				
Child Support/Alimony			Case #	How often?
Pensions (VA, Military Allotment, Retirement, Survivors Insurance, Other)				

**Employer Contact Information**

Name of Employer \_\_\_\_\_ Employer Address \_\_\_\_\_

Employer Telephone \_\_\_\_\_ Employer Fax \_\_\_\_\_

## Facts to Remember

1. Changes must be reported within 10 days
2. Changes must be reported by the 15<sup>th</sup> of the month, to be reviewed for the following month
3. Supporting documentation must be submitted with this form. If you are reporting that:
  - **A reduction in work hours;** you must supply 3 current paystubs **or** letter from employer
  - **A loss of income;** you must supply the termination letter (letter stating you no longer receive income)
  - **A household member moved out;** you must supply a copy of your updated lease showing the individual no longer resides with you
  - **Requesting to add a minor;** you must supply Birth Certificate and SS card (children cannot be added without these documents)
  - **Additional Income;** Supply 3-6 current paystubs or benefit letter
4. Continue to pay the same amount of rent. Once a change is processed you and your landlord will be notified of the new rent amount, as well as the effective date of the change.

**If you require a reasonable accommodation in order to access the Project Based Voucher Program, please advise your case worker.**

I/We certify that the information given to the Project Based Voucher program on household composition, income, net family assets, and allowances and deductions is accurate and complete to the best of my/our knowledge and belief. I/We understand that false statements or information are punishable under Federal Law and or State Law. I/We also understand that false statements or information are grounds for termination of housing assistance and termination of tenancy.

\_\_\_\_\_  
Signature of Head of Household

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Date

\_\_\_\_\_  
Other Family Member over age 18

\_\_\_\_\_  
Date

\_\_\_\_\_  
Other Family Member over age 18

\_\_\_\_\_  
Date