

ARLINGTON HOUSING AUTHORITY
4 WINSLOW STREET
ARLINGTON, MASSACHUSETTS 02474-3062

Date: _____

Family:

RE: _____
Person Vacating Unit

HUD Regulations require that we verify information about all family members including information that a family member is no longer living in the household or that a person not listed on the lease as living in the unit. Please have the person in reference complete, have notarized, and submit the form at the bottom of this page along with at least three (3) of the following forms of new address verification:

RENT RECEIPT AND/OR COPY OF LEASE AGREEMENT
MOST RECENT UTILITY BILL (GAS, ELECTRIC, PHONE, CABLE, ETC.)
CHANGE TO DRIVER'S LICENSE OR VEHICLE REGISTRATION
LETTER FROM EMPLOYER OR PAY STUB SHOWING ADDRESS
POST OFFICE CHANGE OF ADDRESS REQUEST
LETTER FROM REGISTRAR OF VOTERS

LIBRARY CARD WITH CURRENT ADDRESS
LETTER FROM LOCAL CENSUS BUREAU
CREDIT CARD BILL
BANK ACCOUNT STATEMENT
TAX RETURN AND/OR W-2 FORMS
OTHER _____

(Please specify)

Arlington Housing Authority reserves the right to ask for further documentation regarding the family member's address.

Sincerely,

Patty Joyner
Leased Housing Administrator

I, _____ of _____ do hereby certify that:

I no longer live with the _____ family.

I never lived with the _____ family.

I further certify that I currently reside at _____. Attached please find three (3) forms of residence verifications as described above.

Print Name

Signature

Date

The foregoing was subscribed and sworn to before me by _____ this _____

Notary Signature: _____ My commission Expires _____