



CITY OF ANN ARBOR, MICHIGAN

727 Miller Avenue, Ann Arbor, MI 48103

Phone (734) 794-6720

Fax (734) 994-0781

<http://www.a2gov.org/housingcommission>

ANN ARBOR HOUSING COMMISSION

NOTICE OF FAMILY MEMBER MOVE OUT

INSTRUCTIONS: Please complete this form and submit it to you PHA representative immediately in the event that any family member(s) move out of your housing unit. Please provide proof of new residency, such as a lease or utility bill.

HEAD OF HOUSEHOLD		SOCIAL SECURITY #	
ADDRESS		APT #	
CITY	STATE	ZIP	
TELEPHONE:		DATE:	

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Name of family member who moved: _____
2. Date that the family member moved: _____
3. What is the new address of this person: _____

4. What is the new telephone number of this person: _____
5. What source of income will no longer be received as a result of this change and how much?

By signing this document you acknowledge that you have read and do understand the above statement. **Warning:** 18 U.S.C. 1001 provides, among other things that whoever knowingly and willfully makes or uses a document or writing containing false, fictitious or fraudulent statement or entry in any matter within the jurisdiction of a department or agency of the United States shall be fined not more than \$10,000 or imprisoned for not more than five years or both.

Signature Head-of-Household

Date

FOR OFFICE USE ONLY:

M. Wright R. Hester M. Spencer M. Moore A. Ellis M. D'Angelo B. Maitland Other: _____