



# HOUSING OPPORTUNITIES

of SW Washington

Connecting people to homes, hope and opportunity. *Christina M. Pegg, CEO*

## REQUEST TO CHANGE HOUSEHOLD COMPOSITION

Head of Household (print): \_\_\_\_\_

Address: \_\_\_\_\_

Added to Household: (list full name)

Removed from Household:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Duration of Change:

This is a **permanent** change to my household.

This is only a **temporary** change. *This change will be for (check one):*

Fewer than 30 days

30 to 60 days

More than 60 days

This change will take effect on (date): \_\_\_\_\_

Head of Household Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This Household Change is: Approved _____ Denied _____	
Landlord Name (print): _____	Date: _____
Landlord Signature: _____	Date: _____

**Reminder:** Report all changes in writing within 10 days.

Revised 07/2017

