

Transforming Lives & Communities

2640 Fountain View Drive Houston, Texas 77057 T13.260.0500 P 713.260.0547 TTY www.housingforhouston.com

Housing Choice Voucher Program Vendor Address Change Form

l,	(owner / prop	perty manager) am	hereby requesting the
Houston Housing Authority to send	all future correspo	ondence to followin	g new address.
Owner / Payee Name:			
Owner's SSN or Tax ID #		Owner's Vendor #	
New Phone Number: Home			
Email address:			
Property Address: 1			
3			
Old Address: Owner Name:			
Address:			
City			
New Address: Owner Name:			
Address: City	State		
City	State		
Please return this completed form $\underline{\mathbf{v}}$	vith copy of valid	<u>picture ID</u>	
Without copy of picture ID, your cha	•	•	•
Use a separate form for the name ch	nange due to rece	nt marriage or divo	rce.
end we have a self-control			
Email: You may email form to direc Fax: Or fax form to 713-260-0816	taeposit@nousin	grornouston.com	
rax. Of fax form to 713-200-0610			
Requestor's Signature		Date	