



525 SOUTH LAWRENCE STREET
MONTGOMERY, ALABAMA 36104-4611
PHONE: (334)-206-7200 - FAX: (334)-206-7222 - WEBSITE: MHA.TODAY.ORG

LANDLORD CHANGE OF ADDRESS FORM

Date: Social Security # or Tax ID #:

Name:

Company Name

Tenant's Name (list only one): Voucher #:

In order for the Montgomery Housing Authority (MHA) Housing Choice Voucher (HCV) Program office to process your Change of Address request, a complete Request for Taxpayer Identification Number and Certification (W-9) form signed and dated by the legal Owner(s) of the referenced property must be submitted along with this form and a copy of a Valid Driver's license. Changes will not proceed without the complete documentation stated above.

Please be advised that effective my address information will change as listed below: (Date)

Old Address Information:

(Street Address) (City) (State) (Zip Code)

New Address Information:

(Street Address) (City) (State) (Zip Code)

(Property Owner(s) or Manager(s) Signature(s)) (Date)

(Primary Telephone # - Work/Home/Cell (circle one)) (Secondary Telephone # - Work/Home/Cell (circle one))

(Email Address)

Fax this completed form and W-9 to 334-206-7204 Attention - Section 8 Director or drop it off at the Central Office location as listed above.

Note: Your request must be received before the 15th of the current month in order for the change to be reflected in the next month's check run. Changes received after that date will not be reflected for two months. For example: if your request is received on May 22nd, the change will be reflected in the July HAP check run.

Office Use Only:

Date Entered: Initials: Owner #: