



**PENINSULA HOUSING AUTHORITY**

2603 South Francis Street

Port Angeles, Washington 98362

Telephone (360) 452-7631 \* Fax (360) 457-7001 \* Email [info@peninsulapha.org](mailto:info@peninsulapha.org)

**CHANGE IN SITUATION**

**Applicant/Tenant Name, Phone Number and Current Address**

\_\_\_\_\_

**Please make these changes in my records:**

**Change of Name to** \_\_\_\_\_ **from** \_\_\_\_\_

**Change in Address**

New address \_\_\_\_\_

\_\_\_\_\_

City

State

Zip

**Change in phone number:** New number \_\_\_\_\_

**Change in amount of income:** Old \_\_\_\_\_ New \_\_\_\_\_

**Change in source of income:**

Old \_\_\_\_\_

New \_\_\_\_\_

(If employer give name, address and phone number.)

**Add the following family members. Only children 17 and under can be added here. New family members 18 and above even if previously on the lease require regular application and screening.**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

**Remove the following family members:**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Relationship \_\_\_\_\_

**Effective Date of Change(s):** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The Peninsula Housing Authority does not discriminate on the basis of race, color, national origin, religion, sex, disability or familial status in admission of access to it's programs. If you need to request a reasonable accommodation, contact the PHA at (360) 452-7631