

# Housing Authority of the City of Heber Springs

400 E. Spring St. P.O. Box 900 Heber Springs, AR 72543 | Phone: 501.362.6108 | Fax: 501.362.7818 | [www.hspha.com](http://www.hspha.com)

## Request to Add a Household Member

All adults must have an acceptable criminal background, cannot owe any housing authority money, and, if he/she previously participated in a federally subsidized housing program, must have acceptable compliance history. All adult additions must be approved in writing by Housing Authority of the City of Heber Springs before the additional person can move in.

Head of Household Name (Last Name, First Name)

Last 4 digits of SSN

Addition's Name

Last 4 digits of SSN

### Step 1: Landlord Permission (for adult additions only)

I agree to the addition of this person to the current lease I have with the above-named Voucher-holder.

Landlord Name

Phone Number

Landlord Signature

Date

### Step 2: Request Addition's Information

Relation to head of household

Date of birth

Male

Female

List of income received and attached 60 days' worth of verification (for example, paystubs or letter):

Type

Source

Monthly Amount \$

Type

Source

Monthly Amount \$

List all assets held or owned and attach 60 days' worth of verification (for example, bank or account statements):

Type

Source

Monthly Amount \$

Type

Source

Monthly Amount \$

Are you a student?  Yes  No If yes, attach verification of enrollment status, tuition, and financial aid.

Have you ever been convicted of a felony?  Yes  No If yes, please explain:

### Step 3: Required Attachments

For all additions:

Legal ID (such as driver's license for adults or birth certificate for minors)

Original Social Security Card

Declaration of Citizenship or Immigration status

Non-Citizens; Original Homeland Security I-551 or annotated I-94

Income, asset, and student (if applicable) verification

Additional forms for adult additions:

HUD Release of Information

Debt Owed and Terminations (52675)

Statement of Family Obligations

I certify the above information is true and complete and the additional household member will be residing in the unit.

Signature of Head of Household

Date

Addition's signature (if an adult)

Date

