

RANDOLPH COUNTY HOUSING AUTHORITY

PO BOX 1579/1404 North Randolph Avenue, Elkins, WV 26241

PHONE (304) 636-6495 FAX (304) 636-6596

rcha@rchawv.org

PERSONAL DECLARATION FORM TO REPORT CHANGE IN HOUSEHOLD

Name: _____

Address: _____

**COMPLETE, SIGN, DATE
AND RETURN BY**

Phone _____

Reported Change: _____

PLEASE PRINT. This form must be completed in your own handwriting. You must use the correct legal name for each member of your household. All adult members of the household must sign below certifying the information pertaining to them.

HOUSEHOLD COMPOSITION

List all persons who will be living in your home, listing head of household first.

Family Member	Family Member
1.	7.
2.	8.
3.	9.
4.	10.
5.	11.
6.	12.

I do hereby swear and attest that all of the information above about me is true and correct. I also understand that all changes in the income of any member of the household as well as any changes in the household members must be reported to the Housing Authority in WRITING IMMEDIATELY.

Signature of Head of Household Date

Signature of Spouse Date

Signature of Other Adult Date

Signature of Other Adult Date

WARNING: TITLE 18, SECTION 1001 OF THE UNITED STATES CODE, STATES THAT A PERSON IS GUILTY OF A FELONY FOR KNOWINGLY AND WILLINGLY MAKING FALSE OR FRAUDULENT STATEMENTS TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES.