

**SHA-1110**Seattle Housing Authority  
Manual Ref. L11.1-4**Change of income or circumstances**

<b>Head of Household</b> _____	<b>Phone</b> _____
<b>Community / Building</b> _____	<b>Unit #</b> _____
<input type="checkbox"/> By phone / verbal <input type="checkbox"/> By Resident	<b>Date:</b> _____

I certify under penalty of perjury that I have completed all the information below to the best of my knowledge and that it is true and correct.

Resident Signature: \_\_\_\_\_

**Income changes: Fill out this section if you or any family member has changes in income to report**

Which source of income changed? (receiving either more money or less money)

- |   |   |
|---|---|
| <input type="checkbox"/> Employment                         | <input type="checkbox"/> Dept. of Social and Health Services (TANF) |
| <input type="checkbox"/> Social Security and SSI            | <input type="checkbox"/> Employment Security (Unemployment)         |
| <input type="checkbox"/> Income from Annuities and Pensions | <input type="checkbox"/> Labor & Industries (Workman's comp)        |
| <input type="checkbox"/> Other:                             | <input type="checkbox"/> Student Status                             |

Old Income:     \$ \_\_\_\_\_

Date of Change \_\_\_\_\_

New Income:     \$ \_\_\_\_\_

Date of Change \_\_\_\_\_

1. Family member:

Reason for Change:

2. Family member:

Reason for Change:

**Changes in household members: Fill out this section if you have household changes to report**Name \_\_\_\_\_  Add     Remove

Reason for Change:

**To be completed by SHA staff ONLY**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> No rent Change  | <input type="checkbox"/> Under \$100/mo | <input type="checkbox"/> Sporadic         |
| <input type="checkbox"/> Yes rent Change | <input type="checkbox"/> Over \$100/mo  | <input type="checkbox"/> Household change |

**Verification Needed**

\_\_\_\_\_ DSHS-AFDC/GAU

\_\_\_\_\_ ESD Printout

\_\_\_\_\_ Medical Expenses

\_\_\_\_\_ RSDI-SS/SSI

\_\_\_\_\_ Paycheck Stubs

\_\_\_\_\_ Child Care

\_\_\_\_\_ Unemployment

\_\_\_\_\_ Employ. Term Ltr.

\_\_\_\_\_ Interest Income

\_\_\_\_\_ Labor &amp; Industries

\_\_\_\_\_ Other \_\_\_\_\_

Comments: \_\_\_\_\_

Received by \_\_\_\_\_ Date \_\_\_\_\_

Processed by \_\_\_\_\_ Entered into MLS \_\_\_\_\_