



**Housing Choice
Voucher Program**

Address PO Box 19028
190 Queen Anne Ave N
Seattle, WA 98109-1028
Telephone 206-239-1728
FAX 206-239-1770
TDD 1-800-833-6388
Website www.seattlehousing.org

SOCIAL SECURITY NUMBER CERTIFICATION

NUMBER NOT ASSIGNED

I certify that the individual listed below has never been assigned a Social Security Number by the Social Security Administration of the Department of Health and Human Services.

Name _____

Gender _____

Race and Ethnicity _____

Place of Birth _____

Date of Birth _____

Reason for no SSN _____

Alien Registration Number
(or reason for no number) _____

I understand that should any of the individuals listed above obtain a Social Security Number in the future, the Number must be reported to Seattle Housing Authority without delay.

I certify that the information listed above is true and correct to the best of my knowledge. I understand that supplying false statements or false information to the Seattle Housing Authority is considered fraud or misrepresentation, is punishable under Federal, State, and Local Law, and is grounds for rejection of my application, eviction, and/or termination of housing assistance under any of SHA's housing programs.

Applicant/Participant Signature

Date

Print Name

Phone Number