

Neighborhood Services City of Tyler 900 W. Gentry Pkwy.

900 W. Gentry Pkwy. Tyler, Texas 75702 Ph# (903) 531-1303 Fax# (903) 531-1333

INTERIM: CHANGE OF INCOME ()INCREASE ()DECREASE

Reason for change:	
Name:	Employer:
Head of Household:	ATTN:
SSN: ***-**	Phone #
Phone #	FAX Number
The above-named person has authori	ded agency assisting qualified families with rent subsidies. ized the housing agency to verify information regarding te this form and return it to us as soon as possible. Thank
Housing Specialist	Tel. #
I hereby authorize my employer to rea	lease the information requested directly to the housing agency.
Employee Signature:	Date:
EMPLOYED OR NOT) 1. Date employment began: 2. Base Pay: \$ ()Hour () Day 3. Average hours per week If Part Time we need actual hours wor Change in base rate anticipated d Overtime pay: \$ per hou Earnings year to date: \$ 4. Do federal funds pay for any part of sa	Date employment terminated: ()Week ()Bi weekly ()Semi-Monthly ()Monthly () Yearly (if PRN need average hours worked since PRN or reked not varies. (PLEASE ATTACH A 3 MONTH PAYROLL HISTORY) uring next 12 months to \$ per ur expected overtime during next 12 months: hours per week alary? ()No ()Yes Amount \$
	d Stated Code, state that a person knowingly and willingly department or agency of the United States is guilty of a felony.
Signature	Company: Address:
	FAX# (903)531-1333
neturn 10. ATTN	LHV# (202)221-1222

City of Tyler Housing Choice Voucher Program 900 West Gentry Pkwy Tyler Texas 75702