



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

INTERIM: CHANGE OF HOUSEHOLD

First & Last Name: _____

Head of Household: _____

SSN: XXX-XX-_____

Phone: () _____

Address: _____ Apt. # or Unit #: _____

City: _____

State: _____ Zip Code: _____

Gender	M	Male
	F	Female
Ethnicity	A	Hispanic or Latino
	B	Not Hispanic or Latino
Race	1	White
	2	Black/ African American
	3	American Indian/ Alaska Native
	4	Asian
	5	Native Hawaiian/ Pacific Islander

Documentation	6	Social Security Card	9	Court Order	12	School Age Verification with Address
	7	Birth Certificate	10	Proof of Assets	13	CPS Placement Letter
	8	Valid State Identification	11	Proof of Income	14	Declaration of Citizenship

List all members currently residing in the household:

Name (first and last)	Familial Relationship <small>(additional documents may be requested for verification)</small>	Age	Gender <small>(M or F)</small>	Ethnicity <small>(A or B)</small>	Race <small>(1-5)</small>	Documentation Included <small>Select all that apply (6-14)</small>
1.						
2.						
3.						
4.						
5.						

I would like to make the following changes to my household:

NOTE: Additional documentation may be requested by the agency.

Name (first and last)	Add <small>(check)</small>	Remove <small>(check)</small>	Familial Relationship <small>(additional documents may be requested for verification)</small>	Age	Gender <small>(M or F)</small>	Ethnicity <small>(A or B)</small>	Race <small>(1-5)</small>	Documentation Included <small>Select all that apply (6-14)</small>
1.								
2.								
3.								
4.								
5.								

**I understand that I must report any changes in family composition with proper verification within 30 days of the change, and that failure to do so will be cause for termination of my housing assistance. Under the penalty of perjury, I hereby certify under the penalty of perjury that the declarations I have made in this document is true and complete. I understand and acknowledge that any knowing or willful misrepresentations of the declarations (including submission of falsified supporting documentation to support my declarations) contained in this document may result in civil liability and/or criminal penalties, including but not limited to fine or imprisonment, or both under the provisions of Title 18 USC 1001, shall be fined not more than \$10,000 or imprisoned not more than 8 years or both.*

 Head of Household (Printed First & Last Name)

 Head of Household Signature (First & Last Name)

 Date

 Owner/ Owner Representative (Printed First & Last Name)

 Owner/ Owner Representative Signature (First & Last Name)

 Date

HOUSEHOLD CHANGES

Adding & Removing Family Members

Please report all changes in household composition using the **Interim Change of Household Form** attached to this email. The agency will utilize this form, along with supporting documentation, to determine 1) if the requested change will be approved, 2) how it will impact the housing assistance portion on behalf of the agency and the tenant portion paid by voucher participants, and 3) the effective date of the change.

When you experience and/or request changes in household composition, whether adding and/or removing family members, **you are required (*per the obligations of the family*) to report the changes to the agency within 30 days of the change.** The attached form must be completed, **AND** supporting documentation must be provided with the form. The agency will not update records without the proper form **AND** supporting documentation. Please find below a snapshot of the referenced policy found in the agency's administrative plan:

*It is a requirement of the agency and the United States Department of Housing and Urban Development (HUD) that families report all changes in household composition. Program participants must report all changes in household composition to the PHA between annual reexaminations. Additions due to birth, adoption, marriage, or court-awarded custody of a child must be reported and requested by the family in writing within a 30-day period from the date of the change. Please include all the assets of the new family member (if applicable). **The family must obtain PHA approval prior to all other additions to the household.** If any new family member is added, the total family's gross household income must include all sources of income associated with the new family member.*

The image shows a thumbnail of the 'Interim Change of Household Form' (Form NBS-001) from the Neighborhood Services City of Tyler. The form is titled 'INTERIM CHANGE OF HOUSEHOLD' and includes fields for 'Form NBS-001', 'Date of Report', 'DOB', 'Phone', 'Address', 'City', 'State', and 'Zip'. It also features a 'Change' section with checkboxes for 'Addition', 'Removal', and 'Change'. Below this is a table for 'List all members currently residing in the household' with columns for 'Name', 'Relationship', 'Age', 'Status', 'Sex', and 'Residence'. The form also includes a section for 'I request the following changes to my household' with columns for 'Change', 'Date', 'Reason', 'Age', 'Status', 'Sex', and 'Residence'. At the bottom, there are fields for 'Head of Household (Print Full Name)', 'Head of Household (Print Title)', and 'Date'.

NOTE: Reporting changes to the agency requires the participant to submit:

1. An Interim Change of Household Form (completed and signed by both the participant and the current owner), **AND**
2. Supporting documentation for each member (*if requesting to add members*); i.e., familial relationship, social security card, birth certificate, CPS placement letter, court orders, valid state ID, school-age verification, proof of assets, proof of income, etc., **AND**
3. A completed Declaration of Citizenship Form for all newly-added members to the household.

If you have any additional questions, please do not hesitate to contact the agency through email nbsreception@tylertexas.com, phone (903) 531-1303, or fax (903) 531-1333.