

# AMSTERDAM HOUSING AUTHORITY

## SECTION 8 RENTAL ASSISTANCE

52 Division Street • Amsterdam, NY 12010

P: 518-842-2907 • F: 518-842-2973

Housing Authority Use only

### REQUEST FOR ADDITION/ CHANGE TO WAIT LIST APPLICATION

Your Name: \_\_\_\_\_ Waitlist Confirmation #: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

New/Change in Address: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_

**Please check one of the boxes below that describes your current status**

Active on the waiting list for the:  Section 8 Program  Project Based Voucher Program  Mod Rehab

I am reporting a change in my family's circumstances as described below. I understand that the Authority will use the information provided by me to determine my level of benefits and/or program eligibility. I understand that the Authority may verify the information I have provided with a third-party. I certify that the information provided is true and correct to the best of my knowledge and belief. I understand that providing false information may be cause of denial or termination of housing assistance and may be punishable under federal law.

Your Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Member Number	Full Name	Relationship to head	Birth Date	Sex	Race *	Ethnicity* *	Disabled?	Social Security Number	Marital Status
Numero de Miembro	Nombre Completo de todo los Miembros	Relación a Cabeza	Fecha de Nacimiento	Sexo	Raza *	Etnicidad **	Discapacidad	Número de seguro Social	Estado Civil ***
1		HEAD / CABEZA						____ - ____ - ____	
2								____ - ____ - ____	
3								____ - ____ - ____	
4								____ - ____ - ____	

**\*RACE CODES/CODIGOS DE RAZA**

A = American Indian/Alaska Native  
 AS = Asian  
 BA = Black/African American  
 PI = Native Hawaiian/Pacific Islander  
 W= White

**\*\*ETHNICITY CODES/ CODIGOS DE ETNICIDAD**

HL = Hispanic/Latino  
 NHL = Non-Hispanic/Non-Latino

**\*\*\*MARITAL STATUS/ESTADO CIVIL**

S = Single/Soltero  
 M= Married/Casado  
 D= Divorced/Divorciado  
 W = Widow/Viudo

WARNING! Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly making false statements or misrepresentation to any department or agency of the United States.  
 AVISO! Capitulo 18, Sección 1001 del Código de los Estados Unidos afirma que una persona es culpable de una felonía si escribe o testifica falsa información o distorsiona información a cualquier departamento o agencia de los Estados Unidos.