



Housing Authority of Thurston County
1206 12th Avenue SE • Olympia, WA. 98501
Tel: (360) 753-8292 • Fax: (360) 586-0038

ANNUAL HEAD-OF-HOUSEHOLD DECLARATION

There has been no change in my household income.

INCOME CHANGE

New Income Source(s) and Amount(s) _____ Increase

Prior Income Source(s) and Amount(s) _____ Decrease

Effective Date of Change _____

Explain Change in Detail: _____

*No changes can be made without verification.

CHANGE IN HOUSEHOLD MEMBERS

(check one)

Add a Person

Delete a Person

_____	_____	_____
Name	Date of Birth	Social Security #
_____	_____	_____
Relationship to Head-of-Household	Date of Addition or Deletion	

I would like to add someone to the household. I have completed the Personal Declaration form, Authorization for the Release of Information forms (2), Addendums C and D, and provided copies of all new members' Social Security Cards, current Picture ID and Birth Certificates. I have attached a notice from the landlord that they have approved this person to be added to my lease.

PLEASE ALLOW AT LEAST 30 DAYS FOR YOUR REQUEST FOR A CHANGE IN TENANT RENT SHARE TO BE PROCESSED AFTER ALL INFORMATION HAS BEEN PROVIDED.

Signature of Head-of-Household

Date

Print Name of Head-of-Household

