



970 Baxter Boulevard, Portland, ME 04103
P: 207-773-4753 | F: 207-774-6471 | porthouse.org

Housing Officer: _____

Change of Income/Family Composition

_____ Voucher Dept.

_____ Public Housing

Head of Household: _____ Last 4 of SSN #: _____

Telephone: _____ Email: _____

Mailing Address: _____ Physical Address: _____

Is this a Change of Address? ☐ No ☐ Yes

Please fill all areas of this form that are relevant and then sign at the bottom of the second page.

Income Change

Please attach verifications for all income sources. Reference "Required Documentation for Verifications" list for examples.

Is this an ☐ Increase or a ☐ Decrease in Household Income?

Name of Household Member: _____ Last 4 of SSN #: _____

☐ New Job at _____ Date of Hire: _____

Address and Fax# of New Employer _____

☐ Change in Current Job at _____ Change Date: _____

☐ End Previous Job at _____ Last Day: _____

☐ Other Income Source _____ New Amount: _____ Frequency of Payment: _____

Student Status Change

Name of Household Member: _____ Last 4 of SSN #: _____

☐ Household Member has left or graduated from _____

☐ Household Member has started attending _____

Household Composition Change

Reason for this change: ☐ Birth ☐ Foster Care ☐ Adoption ☐ Marriage ☐ Divorce

☐ Other: _____

☐ Name of Household Member Moving Out _____

Forwarding Address: _____

Date of Move-Out: _____ Gender*: ☐ Female ☐ Male ☐ Other

If someone is moving out you must provide proof of their new address such as a current lease, utility bill at the new address, updated driver's license, or certified letter where they are now residing.

☐ Name of Household Member Moving In _____

Relationship of Household Member to the Head of Household: _____

Social Security Number: _____ Date of Birth: _____

Ethnicity: ☐ Hispanic ☐ Non-Hispanic Gender*: ☐ Female ☐ Male ☐ Other

Race: ☐ American Indian/Alaskan Native ☐ Asian ☐ Black/African American
☐ Multi-racial ☐ Native Hawaiian / Other Pacific Island ☐ White

Income Source: _____ Amount: _____ Frequency of Payment: _____

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Assets (where and how much): _____

If a full-time student, name and fax# or address of school: _____

Please provide the follow documents in order for us to properly review the requested addition:

- Permission in writing from landlord
- Birth Certificate
- License or State ID
- Social Security Card
- Proof of Income, if applicable
- Proof of Assets, if applicable
- Declaration of Section 214 Status form
- Immigration Status Verification Consent form

If the new Household Member is 18 years old or older, please also include:

- Consent to Screen for Criminal Activity form
- Authorization for the Release of Information (HUD 9886) form
- PHA Authorization for the Release of Information form
- Debts Owed to Public Housing Agencies and Terminations (HUD 52675) form

Signature of Head of Household

Date

*Disclosure of gender is necessary for voucher size determination only, and will have no impact on program eligibility