Joseph L. Smith Chairman, Board of Commissioners Janet Abrahams **Executive Director**



Property Owner Change of Address

(Phone) 443-984-3364 - (E-mail) program.integrityunit@habc.org - (Facsimile) 410-396-1131

Owner / Managing Agent Full Name:	
Company Name:	
Tenant Name(s):	1.
(If more than 3 use page 2)	2.
	3.
Tenant Address(es)	1.
	2.
	3.
	PART 1 – Old Information
Previous Contact Number:	
Previous Mailing Address:	
	PART 2 – New Information
New Mailing Address:	
New Contact Number	
E-Mail Address	
	PART 3 – Authorization
	I authorize the Housing Authority of Baltimore City – Housing Choice Voucher
	Program permission to change my information as specified above.
DATE:	PRINT: PROPERTY OWNER/MANAGING AGENT NAME:
	x
	PROPERTY OWNER/MANAGING AGENT SIGNATURE:
	XHousing Choice Voucher Program

Housing Choice Voucher Program

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TENANT NAME:	TENANT ADDRESS: