

Authorization for Alternate Payee & Preferred Method of Communication/Correspondence

This will remain in effe	ect until Housing Connect	receives written	n notification of any changes.	
	Communicat		ndence	
				••••
Letters, t	elephone calls, faxes and e-ma	ails will be to the in	ndividual/Agency listed below	
Communication and Correspondence should go to:		Owner	Agent/Manager	
Owner/Agent/Manager Name:			Phone Number:	
Email:			Fax Number:	
	Authorization	າ for Alternate I	Payee	
	m the owner of the property			
Property Address:				
City:		_ State:	Zip:	
I hereby authorize Housi	ing Connect to issue all paym	nents relating to sa	said property to:	
gent/Manager Name: Phone		e Number:		
Street Address:				
City:		State:	Zip:	
Mailing address:				
City:		_ State:	Zip:	
Owner's Signature:			Date:	
	For O	Office Use Only		
Landlord ID Number	FULU	Client Number		
Caseworker		Date Case work	ker Received	

Warning: Title 18, Section 1002 of the U.S. code, states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any Department or Agency of the U.S. or the department of Housing and Urban Development.